

P03000067678

(Requestor's Name)

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(Business Entity Name)

(Document Number)

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500038273965

*Resignation  
of  
RA*

07/06/04--01002--002 \*\*35.00

FILED  
04 JUL -2 PM 4:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
04 JUL -2 PM 2:59  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*DR*  
*7/2/04*



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June 30, 2004

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

WBJ Realty Corp.

**Filing Evidence**

- ☒ Plain/Confirmation Copy
- ☐ Certified Copy

**Retrieval Request**

- ☐ Photocopy
- ☐ Certified Copy

**Type of Document**

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include  
Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input checked="" type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

FILED  
JUN -2 PM 4:22  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509  
Florida Statutes, the undersigned, NATIONSCORP REGISTERED AGENTS, INC.  
(Name of Registered Agent)

hereby resigns as Registered Agent for WBJ REALTY CORP.  
(Name of Corporation)

P03000067678

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which  
this statement is filed.

W. Edward Hand  
(Signature of Resigning Agent)

If signing on behalf of an entity:

ED HAND

(Typed or Printed Name)

PRESIDENT

(Capacity)

**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation

**Make checks payable to Florida Department of State and mail to:**  
**Division of Corporations**  
**P.O. Box 6327**  
**Tallahassee, FL 32314**