P05000093813

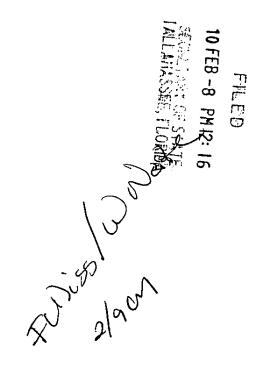
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
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Special Instructions to Filing Officer:	

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02/08/10--01044--019 **35.00



COVER LETTER

	nendment Section vision of Corporations		
SUBJECT	: ST. JOHNS COMMUN	ITIES, INC.	
DOCUME	ENT NUMBER: P05000093	813	
The enclos	ed Articles of Dissolution and fed	e are submitted fo	or filing.
Please retu	rn all correspondence concerning	this matter to the	following:
CHERY	L GUDZAK		
	(Name of C	ontact Person)	
ST. JOH	INS COMMUNITIES, INC	C .	
	(Firm	(Company)	•
932 BAY	YSIDE BLUFF ROAD		
	(Ad	dress)	_
JACKSO	ONVILLE, FL 32259		
	(City/State	and Zip Code)	
For further	information concerning this matte	er, please call:	
CHERY	L GUDZAK	at (904) 651-1012
((Name of Contact Person)		Code & Daytime Telephone Number)
Enclosed is	s a check for the following amoun	t:	
₽ \$35 Filiı	ng Fee \$\bigs\tag{\$43.75 Filing Fee & [\bigs\tag{Certificate of Status}	\$43.75 Filing F Certified Copy (Additional copy enclosed)	Certificate of Status &
An Di P.C	MLING ADDRESS: nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314		STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	ST. JOHNS COMMUNITIES, INC.
SECOND:	The document number of the corporation (if known): P05000093813
THIRD:	The file date of the articles of incorporation: 07/01/2005
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid. The pet assets of the corporation remaining after winding up have been distributed.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
•	
Sign	ature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	CHERYL GUDZAK
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of Person Signing)

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: ST. JOHNS COMMUNITIES, INC.
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
No member, officer or Director of this corporation shall be personally liable for the debts of
obligations of this corporation of any nature whatsoever, nor shall any of the property of the members
officers or Directors be subject to the payment of the debts or obligations of this corporation.
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
932 BAYSIDE BLUFF ROAD
JACKSONVILLE, FL 32259
<u> </u>
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
CHERYL GUDZAK Cy Hul
Printed Name of the Person Filing Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00