

P07000003002

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

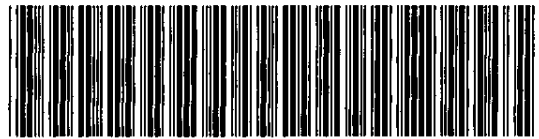
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700113380127

*Refunded 2-26-08 JK*

02/26/08--01001--002 \*\*52.50

01/03/08--01010--003 \*\*35.00

*PA Resp*

FILED  
08 FEB 25 AM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. Roberts FEB 26 2008



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 7, 2008

LISA GLENN OSGARD  
WHALE TALES  
188 PINEHURST POINTE DR  
ST AUGUSTINE, FL 32092

SUBJECT: WHALE TALES, INC.  
Ref. Number: P07000003002

We have received your document for WHALE TALES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts  
Regulatory Specialist II

Letter Number: 308A00001187

RECEIVED  
2008 FEB 25 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Whale Tales Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000003002

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LISA Glenn Osgard  
(Name of Person)

Whale Tales  
(Name of Firm/Company)

188 Pinehurst Pt dr  
(Address)

St Aug FL 32092  
(City/State and Zip Code)

For further information concerning this matter, please call:

Pete Osgard at (904) 540 4450  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**Street Address:**  
Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

FILED  
08 FEB 25 AM 10:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, LISA GLENN OSQARD

(Name of Registered Agent)

hereby resigns as Registered Agent for Whale Tales, Inc.

(Name of Corporation)

P07000003002  
(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.

Lisa Glenn Osqard  
(Signature of Resigning Agent)

If signing on behalf of an entity:

\_\_\_\_\_  
(Typed or Printed Name)

\_\_\_\_\_  
(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**