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To Whom It May Concern:

This letter is to confirm that we, the undersigned, can confirm that Michael S. Sebree and Tabatha C. Sebree have not been affiliated in any way with either Setower Corporation or Setower—The Villages Corporation since February, 2010.

If you have any questions regarding this, please feel free to contact either of us at the phone numbers listed below.

Sincerely

Gregory L/King 352-408-9050

Evelyn A. Sebree, PhD

352-636-3658

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SETOWER THE VILL	AGES (Name of Corporation) f
DOCUMENT NUMBER: P09000	•
The enclosed Resignation of Register	red Agent for a Corporation and fee are submitted for filling.
Please return all correspondence cond	cerning this matter to the following:
TABITHA C. SEBREE	
(Name of Person	n)
(Name of Firm/Com	pany)
204 BRYAN STREET	
(Address)	
EUSTIS, FLORIDA 32726	
(City/State and Zip C	Code)
For further information concerning th	is matter, please call:
TABITHA C. SEBREE (Name of Person)	at (352) 483-3677 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively diss	the Florida Department of State for \$87.50 for an active corporation solved, voluntarily dissolved or withdrawn corporation.
Amendmet Section Division of Porporations Climan Bailding	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	007.0502(2), 617.0502(2), 607.1509, or 617.1509	∌,
Florida Statutes, the undersigned,	ABITHA C. SEBREE (Name of Registered Agent)	
hereby resigns as Registered Agent for		PHO!
P09000086428		
(Document Number, if known)	_	
A copy of this resignation was mailed t	to the above listed corporation at its last known a	ddress.
this statement is filed.	e discontinued on the 31st day after the date on w	_' hich
If signing on behalf of an entity:		
	(Typed or Printed Name)	11 M SECH TALL/
	(Typed of Limed Painty)	FILED MAY 26 PA CRETARY OF CAHASSEE.
	(Capacity)	PH 3: 1: OF STATI

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withdrawn corporation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