

749847

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

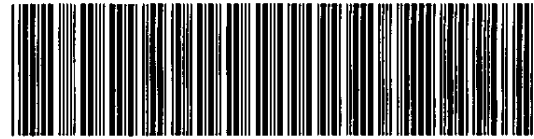
(Business Entity Name)

(Document Number)

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08/27/10--01011--017 \*\*35.00

10 AUG 27 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEARCHED  
AND  
FILED

Handwritten signature and date: 09/18/10

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Braben Condominium Association, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 749847

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Juliette The  
(Name of Person)

Braben Condominium Association, Inc.  
(Name of Firm/Company)

4316 S. Ocean Blvd. #4  
(Address)

Highland Beach, FL 33487  
(City/State and Zip Code)

For further information concerning this matter, please call:

Juliette The at ( 561 ) 676-4768  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Barbara Lang, hereby resign as Treasurer  
(Title)

of Braben Condominium Association, Inc.  
(Name of Corporation)

749847, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

\_\_\_\_\_  
(Signature of resigning officer/director)

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED