

765167

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

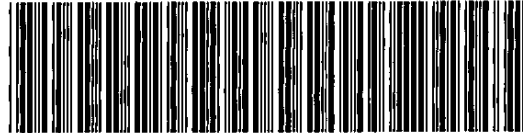
(Document Number)

Certified Copies _____ Certificates of Status _____

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Corrected
name of
corp.



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MISSION OAKS OWNERS ASSOC.
(Name of Corporation)

DOCUMENT NUMBER: 765167

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

Please return all correspondence concerning this matter to the following:

Mike Schmidt
(Name of Person)

Mission Oaks Owners Assoc.
(Name of Firm/Company)

Po Box 1124
(Address)

New Smyrna Beach FL 32168
(City/State and Zip Code)

For further information concerning this matter, please call:

Mike Schmidt at (386) 423 7295
(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, CAROLE BISHOP, hereby resign as TREASURER
(Title)
of MISSION OAKS OWNERS ASSOC., INC.
(Name of Corporation)
765167, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

Carole Bishop
(Signature of resigning officer/director)

will be new Secretary.

thanks

*Mike Schnidt
President*

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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