## G92477

(Requestor's Name)	
(Address)	
,	
(Address)	
,	
(City/State/Zip/Phone #)	
(Olly/Otate/Zip// Hone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
<u></u>	
Special Instructions to Filing Officer:	

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000161746330

Alsignation
00 officer
10/29/09--01004--010 \*\*35.00

FILED
2009 DCT 29 PH I2: 40
SECRETARY OF STATE

DR Balon

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: OAKWOOD ASSOC	CIATES, INC
	(Name of Corporation)
DOCUMENT NUMBER: G924	477
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence con	ncerning this matter to the following:
LaFoye Schuldt	
(Name of Pers	on)
(Name of Firm/Co	
(Name of Firm/Co	mpany)
4028 Rolling Oaks Drive	
(Address)	
Winter Haven, FL 33880	
(City/State and Zip	Code)
For further information concerning	this matter, please call:
Jack Robinson	at ( 863 ) 299-5696 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e 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 ED ER / DIRECTUR REST FOR A CORPORATION 2009 OCT 29 PM 12: 40

	COKUI
<sub>I,</sub> LaFoye Schuldt	, hereby resign as President
	(Title)
of Oak Wood Associates, Inc	
	e of Corporation)
G92477 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	<del></del> -
DECEASED	10/09/09
	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