

ND4 000000697

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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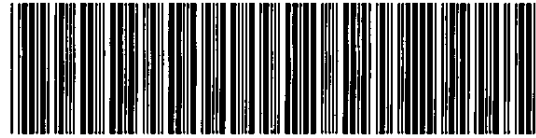
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
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As requested  
o/p les

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

SUBJECT: Forgotten Soldiers Outreach, Inc.  
(Name of Corporation)

DOCUMENT NUMBER: N04000000697

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

Please return all correspondence concerning this matter to the following:

Elaine Schwartz  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

9553 Shadybrook Dr. #102  
(Address)

Boynton Beach FL 33437  
(City/State and Zip Code)

For further information concerning this matter, please call:

\_\_\_\_\_  
(Name of Person) at (\_\_\_\_\_) (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

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DIVISION OF CORPORATIONS

2007 SEP 24 AM 9:32

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Elaine Schwartz, hereby resign as Director  
(Title)

of Forgotten Soldiers Outreach, Inc.  
(Name of Corporation)

N04000000697, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Elaine Schwartz  
(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