N04000006805

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Off Resign
T. Lewis

03/11/05--01035--012 **105.00

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05 MAR 11 PM 2:25

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Waves St. Pete Beach Condo Assoc
(Name of Corporation)

DOCUMENT NUMBER: N04000006805

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

Please return all correspondence concerning this matter to the following:

Raymond Montchal
(Name of Person)

St. Pete Beach Place Inc
(Name of Firm/Company)

429 B 75th Ave N
(Address)

St. Pete Beach FL 337706
(City/State and Zip Code)

For further information concerning this matter, please call:

Kim Montchal at (727) 688-3214
(Name of Person) (Area Code & Daytime Telephone Number)

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

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED
05 MAR 11 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Raymond Montchal, hereby resign as President
(Title)

of Waves St. Pete Beach Condominium Assoc. Inc
(Name of Corporation)

N04000006805
(Document Number, if known), a corporation organized under the laws of the State of

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