

N05 00000 1616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

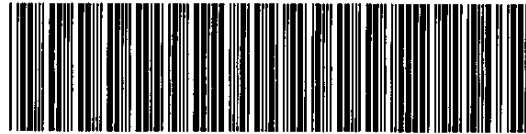
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PHH

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** GARY BOULANGER FUND INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N05000001616

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

KAREN SHOBER  
(Name of Person)

GARY BOULANGER FUND INC.  
(Name of Firm/Company)

17853 NW 20 ST  
(Address)

PEMBROKE PINES FLORIDA 33029  
(City/State and Zip Code)

For further information concerning this matter, please call:

KAREN SHOBER at ( 954 ) 981-1974  
(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

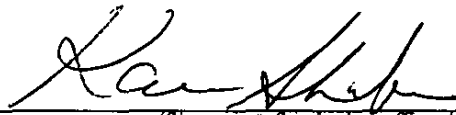
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, KAREN SHOBER, hereby resign as SECRETARY  
(Title)

of GARY BOULANGER FUND INC.  
(Name of Corporation)


N05000001616, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)



**FOR AN OATH OR AFFIRMATION:**  
STATE OF FLORIDA  
COUNTY OF Broward  
Sworn to (or affirmed) and subscribed before me this 22<sup>nd</sup> day of 09, 2006, by  
(NOTARY SEAL) Karen H. Shober  
Personally Known \_\_\_\_\_ OR Produced Identification   
Type of Identification Produced S160-508-50-530-0  
F.I.D.L.-8

 ISABEL MORENO  
MY COMMISSION #DD249032  
EXPIRES: SEP 11, 2007  
Bonded through Advantage Notary

**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

**FILED**  
**OCT -6 PM 11:00**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA