

N10 00000 7040

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

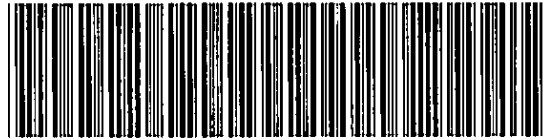
(Business Entity Name)

(Document Number)

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20 JUN -1 PM 1:55

JUN 22 2020  
C. M. WAIR

**TRANSMITTAL LETTER**

20 JUN -1 PM 1:55

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Williston Central Christian Academy  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** N10000007040  
\_\_\_\_\_

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

Julie Alexander  
\_\_\_\_\_  
(Name of Person)

Williston Central Christian Academy  
\_\_\_\_\_  
(Name of Firm/Company)

225 SE 4th Street  
\_\_\_\_\_  
(Address)

Williston, FL 32696  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Julie Alexander at ( 352 ) 529-0900  
\_\_\_\_\_  
(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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

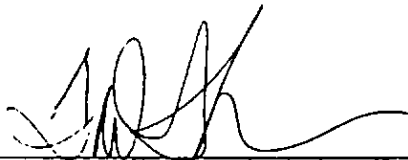
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

20 JUN - 1 PH 1:55

I, Tara Gallagher, hereby resign as Officer (Title)

of Williston Central Christian Academy (Name of Corporation)

N1000007040, a corporation organized under the laws of the State of  
(Document Number, if known)  
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