

P02000117290

David K. Oaks D.A.

(Requestor's Name)

407 E. Marion Ave

(Address)

Ste 101

(Address)

Punta Gorda, FL 33950

(City/State/Zip/Phone #)

☐

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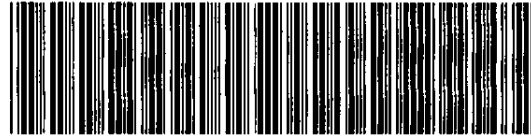
(Business Entity Name)

(Document Number)

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*C.A. Resig*

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SEP 20 2010

EXAMINER

**DAVID K. OAKS, P.A.**  
**Attorney at Law**

**DAVID K. OAKS**

\*Also licensed in North Carolina  
Email: doaksesq@comcast.net

**JACKIE M. SMITH**

Florida Registered Paralegal  
Email: jackieoakslaw@comcast.net

September 9, 2010

Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

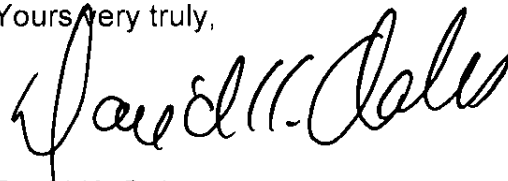
Re: SOUTHWEST RECOVERY, INC.  
Document Number P02000117290

Dear Sir or Madam:

Enclosed please find an original and one copy of the the Resignation of Registered Agent, Barbara D. Scheele for Southwest Recovery, Inc. and an original and one copy of the resignation of Officer / Director of Barbara D. Scheele as Vice President/Treasurer and Director. Our check in the amount of \$122.50 for the filing fee of these two documents is attached. Please return a stamped copy of the documents to our office at the below address.

Thank you for your assistance in this matter.

Yours very truly,



David K. Oaks

DKO:js  
Encl.  
cc: client

**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, BARBARA D. SCHEELE

(Name of Registered Agent)

hereby resigns as Registered Agent for SOUTHWEST RECOVERY, INC.

(Name of Corporation)

P02000117290

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

*Barbara D. Scheele*

(Signature of Resigning Agent)

If signing on behalf of an entity:

BARBARA D. SCHEELE

(Typed or Printed Name)

(Capacity)

**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporation

**Make checks payable to Florida Department of State and mail to:**

**Division of Corporations**

**P.O. Box 6327**

**Tallahassee, FL 32314**

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