## P09000093824

| (Red                                    | questor's Name)   |             |
|---|-------------------|-------------|
| (Add                                    | dress)            |             |
|   |                   |             |
| (Add                                    | dress)            |             |
| (City                                   | y/State/Zip/Phon  | e #)        |
| PICK-UP                                 | ☐ WAIT            | MAIL        |
| (Bu:                                    | siness Entity Nai | me)         |
|   |                   |             |
| (Do                                     | cument Number)    | 1           |
| Certified Copies                        | Certificates      | s of Status |
| Special Instructions to Filing Officer: |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |
|   |                   |             |





100185224241

09/10/10--01034--011 \*\*35.00

2010 SEP 10 PH 12: 46
SECHETARY OF STATE

Off. Resign.

SEP 1 4 2010

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

| SUBJECT: COASTAL BUILD   | ING SUPPLY OF JAX INC  |
|--|--|
|  | (Name of Corporation)  |
| DOCUMENT NUMBER: PO  | 9900093824   |
| The enclosed Officer/Director Re   | signation for a Corporation and fee are submitted for filing   |
| Please return all correspondence   | concerning this matter to the following:   |
| TRACY WOOTON   |  |
| (Name of Po  | erson)   |
| COASTAL BUILDING SUPPL   | LY OF JAX INC  |
| (Name of Firm/   | Company)   |
| 2910 WEST BEAVER STREE   | ET   |
| (Addres  | s)   |
| JACKSONVILLE, FLORIDA  | 32254  |
| (City/State and  | Zip Code)  |
| For further information concerning   | ng this matter, please call:   |
| TRACY WOOTON   | at ( 904 ) 861-2500 (Area Code & Daytime Telephone Number)   |
| (Name of Person)   | (Area Code & Daytime Telephone Number)   |
| Enclosed is a check for \$35.00 m  | ade 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. ELLEN S. BROOKS            | , hereby resign as VICE PRESIDENT                        |  |
|-------------------------------|--|--|
| ,                             | (Title)  |  |
| of_ COASTAL BUILDING SUPPLY O |  |  |
| (Name of C                    | orporation)  |  |
| P09000093824, a, a            | , a corporation organized under the laws of the State of |  |
| FLORIDA                       |  |  |
|                               |  |  |

## **FILING FEE IS \$35.00**

Signature of resigning officer/director)

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

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314