

266231

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

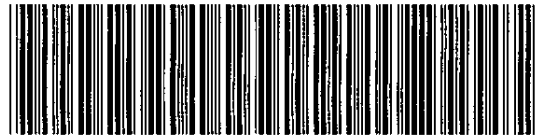
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CAPE CANAVERAL OFFICE CENTER, INC.

(Name of Corporation)

DOCUMENT NUMBER: 266231

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

Judith C. Deevers

(Name of Person)

Cape Canaveral Office Center, Inc.

(Name of Firm/Company)

8809 Live Oak Ct.

(Address)

Cape Canaveral, FL 32920

(City/State and Zip Code)

For further information concerning this matter, please call:

Judith C. Deevers

(Name of Person)

at (321)

783-4459

(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, Judith C. Deevers, hereby resign as V.P./Secretary
(Title)

of Cape Canaveral Office Center, Inc.
(Name of Corporation)

266231, a corporation organized under the laws of the State of
(Document Number, if known)

Florida.


(Signature of resigning officer/director)

FILED
09 JUN -5 PM 12:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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