

746349

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

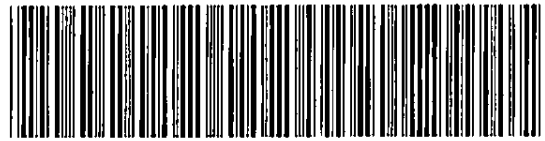
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL
APR 24 2024 PM 2:14

R. HUNT

C 4/25/24

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, ALFRED W. BRETTICE, hereby resign as DIRECTOR
(Title)

of THE WORDS OF PORT SAINT JOHN P.D.A.
146349 (Name of Corporation)

_____, 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

2017-9-9 PM 2:14
STATE OF FLORIDA
TALLHASSEE, FL
ED

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

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

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Woods of Port St. John Pca.
(Name of Corporation)

DOCUMENT NUMBER: 746349

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALFRED BOETTJE
(Name of Person)

THE WOODS OF PORT SAINT JOHN
(Name of Firm/Company)

1000 GALILEO STREET
(Address)

PORT SAINT JOHN, FL 32927
(City/State and Zip Code)

For further information concerning this matter, please call:

ALFRED BOETTJE at (321) 412-3642
(Name of Person) (Area Code & Daytime Telephone Number)

RECEIVED - 9 PM 2:14
DIVISION OF STATE
CORPORATIONS
TALLHASSEE, FL
310

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