

747827

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

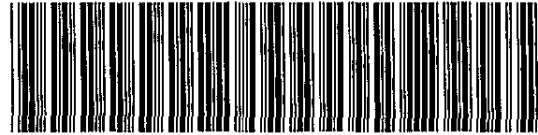
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/27/04--01005--005 **75.00

*Off Resign
T. Lewis*

FILED
04 SEP 26 2003 20

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

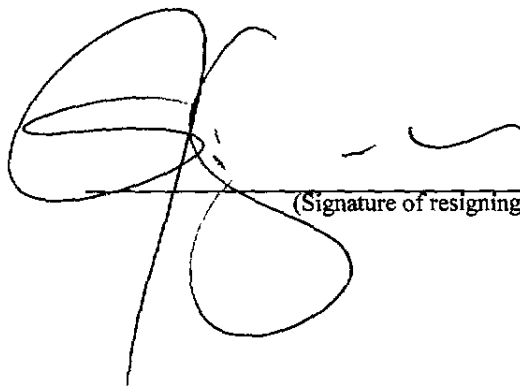
FILED
04 SEP 24 PM 3:20
TALLAHASSEE, FLORIDA

I, Carlos M. Gonzalez, hereby resign as Secretary/Director
(title)

of Las Palmas Condominium No. 9/5 Association, Inc.
(Name of Corporation)

747827
(Document Number, if known), a corporation organized under the laws of the State of

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