754888

(R	equestor's Name)
(A	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(B	usiness Entity Name)
(D	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:
	Office Use Only



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TRANSMITTAL LETTER

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TO: Amendment Section Division of Corporations		
SUBJECT: MARINERS WAY CONDO ASSOC. (Name of Corporation)		
DOCUMENT NUMBER: 756888		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Condo President (Name of Person)		
Mariners Way Condo Assoc (Name of Firm/Company)		
2707 NE 14tt SV - (Address)		
Pompano Beach FL33062. (City/State and Zip Code)		
For further information concerning this matter, please call:		
CANDY DUPONT at (561) 346 4688 (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 2661 Executive Center Circle Tallahassee, FL 32301

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Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

1. Cheryl L. Frazier hereby resign as president	
of Mariners Way Condon Injury And	St. Clartiur
756888 a corporation organized under the laws of the State of (Document Number, if known)	
Florida	
(Signature of resigning officer/director)	001:1
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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