

F00000000 6821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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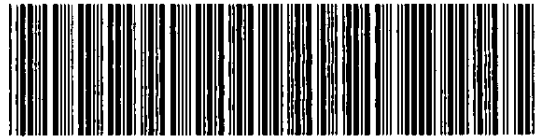
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Roberts FEB 08 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SEAPORT Associates, Inc
(Name of Corporation)

DOCUMENT NUMBER: F0000000 6821

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

Please return all correspondence concerning this matter to the following:

Cheryl A. David
(Name of Person)

Seaport Associates, Inc
(Name of Firm/Company)

PO Box 31298
(Address)

Palm Bch Gardens, FL 33420
(City/State and Zip Code)

For further information concerning this matter, please call:

Robyne McCrethy at (901) 262-5203
(Name of Person) (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, Bobyne A. McCarthy, hereby resign as Sec/TRES - OFFICER
(Title)
of SEAPORT ASSOCIATES, INC.
(Name of Corporation)

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

Bobyne A. McCarthy 2/2/10
(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

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