

F63197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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@ 7/22/08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: William Gorman & Associates
(Name of Corporation)

DOCUMENT NUMBER: F63197

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

Please return all correspondence concerning this matter to the following:

Sharon A. LaPointe
(Name of Person)

William Gorman & Associates
(Name of Firm/Company)

600 n. Thacker Ave, Ste D49
(Address)

Kissimmee, FL 34741
(City/State and Zip Code)

For further information concerning this matter, please call:

Sharon LaPointe at (321) 689-0751
(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, Sharon A. LaPointe, hereby resign as Director /
(Title)

of William Gorman & Associates, INC.
(Name of Corporation)

F63197, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.

Sharon A. LaPointe
(Signature of resigning officer/director)

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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