

# H20500

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

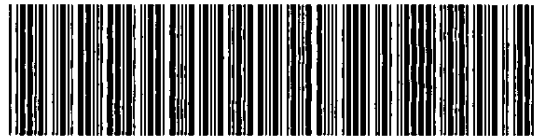
(Document Number)

Certified Copies \_\_\_\_\_

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Special Instructions to Filing Officer:

Office Use Only



100159268671

*Resignation  
to Officer*

08/07/09--01008--009 \*\*35.00

2009 AUG -7 PM 3:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

*AF  
8/11/09*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Chapman Professional Lawn Maintenance, Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** H20500

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

Please return all correspondence concerning this matter to the following:

Linda Chapman

(Name of Person)

Chapman Professional Lawn Maintenance, Inc

(Name of Firm/Company)

1623 Windsor Dr

(Address)

Clearwater, Florida 33755

(City/State and Zip Code)

For further information concerning this matter, please call:

Linda Chapman

(Name of Person)

at ( 727 ) 641-8062

(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, Ronald L Chapman, hereby resign as President

**FILED**  
2009 AUG - 7 PM 3:39  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

of Chapman Professional Lawn Maintenance, Inc  
(Name of Corporation)

H20500, 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**

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

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