

# K30509

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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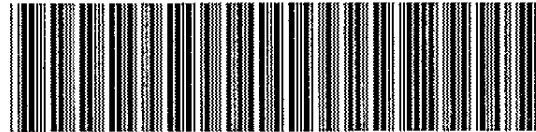
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Strawberry Ridge, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** K30509

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

Please return all correspondence concerning this matter to the following:

Julie V. Fanelli

(Name of Person)

Strawberry Ridge, Inc.

(Name of Firm/Company)

11300 4th Street North Suite 200

(Address)

St. Petersburg, FL 33716

(City/State and Zip Code)

For further information concerning this matter, please call:

Julie V. Fanelli

(Name of Person)

at ( 727 ) 577-5522

(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, Karen McDonald, hereby resign as Treasurer  
(Title)

of Strawberry Ridge, Inc.  
(Name of Corporation)

K30509, 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**

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

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