L76897

(Requestor's Name)		
(Ac	ldress)	·, <u></u> .
	dress)	
(AC	aress)	
(Ci	y/State/Zip/Phone	() () () () () () () () () () () () () (
PICK-UP		MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to Filing Officer:		
,,,,,,,,,	Office Line Oral	
Office Use Only		



loignation

10/24/05--01018--012 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

÷.

<u>ب</u> م

Name of Corporation) SUBJECT: 76897 L **DOCUMENT NUMBER:**

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

Please return all correspondence concerning this matter to the following:



For further information concerning this matter, please call:

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

FILED 05 OCT 24 PM 12: 36 SECRETARY OF STATE FAIL AHASSEE, FLORIDA **OFFICER / DIRECTOR RESIGNATION** FOR A CORPORATION I Guy R. McRobert, hereby resign as Sect. (Title) -S AND POOL COnstruction. (Name of Corporation) of____ _____, a corporation organized under the laws of the State of known) Florida

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