

N000000008086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

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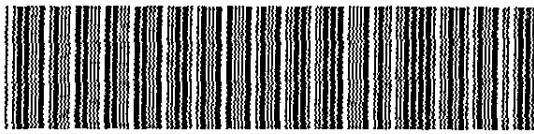
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

O/S Resign
mm
2/20/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DPA-LOCKA NORTHDADE FRONT PORCH
(Name of Corporation)

DOCUMENT NUMBER: N000000008086

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

Please return all correspondence concerning this matter to the following:

Kathy E WILLIAMSON
(Name of Person)

DPA-LOCKA/NORTHDADE FRONT PORCH
(Name of Firm/Company)

5332 SW 126 AV
(Address)

MIRAMAR, FL 33027
(City/State and Zip Code)

For further information concerning this matter, please call:

KATHY WILLIAMSON at (305) 542-8299
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, KATHY WILLIAMSON, hereby resign as VICE-PRESIDENT
(Title)

of DPA-LOCKA / NORTH DADE FRONT PORCH COUNCIL
(Name of Corporation) Inc.

No0000008086, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Kathy E Williamson
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 FEB 16 PM 3:07

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