

NO10000006896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

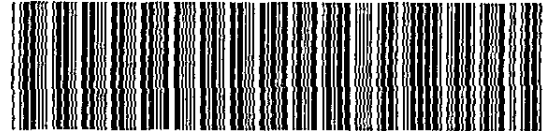
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Officer Resignation

T BROWN JAN 25 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MIGHTY OAK NON PROFIT, INC.
(Name of Corporation)

DOCUMENT NUMBER: N01000006896

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

Please return all correspondence concerning this matter to the following:

JOHN M. BAKER

(Name of Person)

PROFESSIONAL REHAB, INC.

(Name of Firm/Company)

806 W. COLUMBUS DR.

(Address)

TAMPA, FL 33602

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN M. BAKER

(Name of Person)

at (813) 309-9988

(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

ORIGINAL

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**


FILED
06 JAN 20 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, GUILLERMO CORSA, hereby resign as DIRECTOR
(Title)

of MIGHTY OAK NONPROFIT, INC.
(Name of Corporation)

N01000006896, 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