## N03000007255

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT W	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Coples	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	

Office Use Only



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## TRANSMITTAL LETTER

SURJECT: P.O.P. Protectors Of Putnam County's Water, Inc. (Name of Corporation)
DOCUMENT NUMBER: (Name of Corporation)
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Jane Hamby (Name of Person)
(Name of Firm/Company)
112 Lake Broward Lane (Address)
Pomona Park, Florida 32181
(City/State and Zip Code)
For further information concerning this matter, please call:
Jane Hamby 386 649-9231
(Name of Person) at (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 Guillahassee, FL 32314  Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

TO: Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Jane Hamby	, hereby resign as	President (Ni	ile)	<del></del>	
of P	0.0.P. Protectors Of Put	nam County's Water, Inc.			<b></b> ,	
	N03000007255 (Document Number, if known)	a corporation organized under	the laws of the	State of		
F1	orida	effective May 3, 2004.		SECRE.	<b>-</b>	<del></del>
	Que	(Signature of resigning officer/director)		2 PH 2:51	ILED	<u>.</u>

## 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