

N 0300000 73 94

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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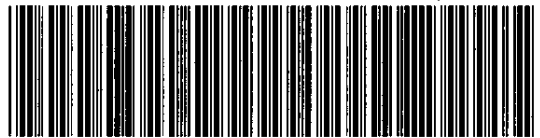
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

Resign
C.COULLETTE

APR 23 2009

EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SEA HAVEN PROPERTY OWNERS ASSOCIATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: N03000007394

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

MATTHEW SCOGGINS

(Name of Person)

(Name of Firm/Company)

770 HWY 98

(Address)

PORT ST JOE, FL 32456

(City/State and Zip Code)

For further information concerning this matter, please call:

MATTHEW SCOGGINS

(Name of Person)

at (850) 229-7827

(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, MATTHEW SCOGGINS, hereby resign as PRES
(Title)

of SEA HAVEN PROPERTY OWNERS ASSOCIATION, INC.
(Name of Corporation)

N03000007394, a corporation organized under the laws of the State of
(Document Number, if known)

FL


(Signature of resigning officer/director)

FILED
09 APR 21 PM 2:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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