## N0400000 4396

(F	Requestor's Name	)
(A	ddress)	<del></del>
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	City/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Na	nme)
(C	Ocument Number	r)
Certified Copies	Certificate	es of Status
Special Instructions to	o Filing Officer:	

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SECRETARY OF STATE
FALL AHASSEE, FLORID

8/D Resign. 10/05/07 Dc

## **COVER LETTER**

SUBJECT: Harbor Light Christian Academy Inc. (Name of Corporation)
DOCUMENT NUMBER: NO40004396
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Cynthia Sanzonl (Name of Person)
(Name of Firm/Company)
705 Delespine Aue
S+ Aug F/ 37884 (Sty/State and Zip Code)
For further information concerning this matter, please call:
Cyshia Sanzone at (904) 169-5075 (Area Code & Daytime Telephone Number)

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

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

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314