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· (R	lequestor's Name)	· · · · · · · · · · · · · · · · · · ·
(A	ddress)	
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(C	city/State/Zip/Phone	> #)
PICK-UP	☐ WAIT	MAIL .
(B	usiness Entity Nan	ne)
(D	ocument Number)	
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11/09/09-01029-012 **35.00 **35.00 09 NOV -9 AH 10: 1-3

0 D Resign

NOV 1 3 2009

COVER LETTER

TO: ' Amendment Section Division of Corporations

L	
SUBJECT: Pelican Pond Cond	
	(Name of Corporation)
DOCUMENT NUMBER: N0500	8001008
The enclosed Officer/Director Resign	nation for a Corporation and fee are submitted for filing.
Please return all correspondence con	cerning this matter to the following:
Shelly Stano	
(Name of Perso	n)
Law Offices of Thomas D.	
(Name of Firm/Con	npany)
9711 Overseas Highway	
(Address)	
Marathon, FL 33050	
(City/State and Zip	Code)
For further information concerning the	nis matter, please call:
Shelly Stano	at (305) 743-8118 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	payable to the Florida Department of State.
Street Address: Amendment Section	Mailing Address: Amendment Section
Division of Corporations	Division of Corporations
Clifton Building	Post Office Box 6327
2661 Executive Center Circle Tallahassee, FL 32301	Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>Darlene Olden</u>	, hereby resign as <u>Secretary/Treasurer/Direct</u> (Title)	<u>t</u> or
of Pelican Pond Condominio	um Association, Inc. ume of Corporation)	
(Document Number, if known)	, a corporation organized under the laws of the State of	
Florida	······································	
Dale	Og NOV - 9 AM 10: 4.7 (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