## N0500000329

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	<b>⇒</b> #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
Jil/3p		

Office Use Only

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US MAR -8 PM 2:00 SECRETARY OF STATE FALLAHASSEE, FLORID,

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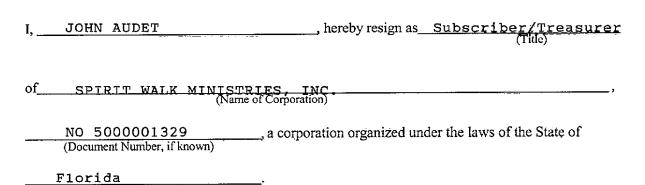
## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: SPIRIT WALK MINISTRIES, INC. (Name of Corporation)
DOCUMENT NUMBER: N05000001329
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
GREGORY V. BEAUCHAMP, P.A. (Name of Person)
GREGORY V. BEAUCHAMP, P.A.
(Name of Firm/Company)
P. O. Box 1129 (Address)
Chiefland, in FL 32644 (City/State and Zip Code)
For further information concerning this matter, please call:
G. V. BEAUCHAMP at (352) 493-1458 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to the Florida Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

CR2E044(11/02)





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