

105000005411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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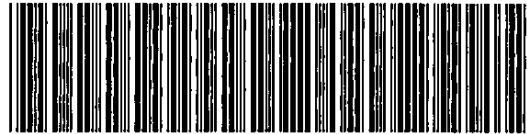
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Roberts NOV 01 2006

LAW OFFICES

DONAHOO, BALL & McMENAMY, P.A.

50 NORTH LAURA STREET, SUITE 2925

JACKSONVILLE, FLORIDA 32202

www.donahooball.com

(904) 354-8080

FAX: (904) 791-9563

*BOARD CERTIFIED TAX LAWYER

THOMAS M. DONAHOO*

HAYWOOD M. BALL

WILLIAM B. McMENAMY*

THOMAS M. DONAHOO, JR.

EMILY R. KERNS

JOHN W. DONAHOO

(1907-1993)

October 31, 2006

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: Mothers Against Brain Injury, Inc.
Our file reference 1211.001
Resignation of Directors

Dear Sir or Madam,

I enclose two (2) letters of resignation for the above named Corporation. I am also sending a check in the amount of \$70 to cover the filing fee for each letter. Please acknowledge receipt of these documents by returning the letter in the envelope enclosed for that purpose.

Should you have any questions, please do not hesitate to call me.

Sincerely,



Emily R. Kerns

Enclosures
cc: Tracy East

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Mothers Against Brain Injury, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N05000005411

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Emily R. Kerns

(Name of Person)

Donahoo, Ball & McMenamy, P.A.

(Name of Firm/Company)

50 North Laura Street, Suite 2925

(Address)

Jacksonville, FL 32202

(City/State and Zip Code)

For further information concerning this matter, please call:

Emily R. Kerns

(Name of Person)

at (904) 354-8080

(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, Carolyn Leonard, hereby resign as Director, Vice President, and Treasurer
(Title)

of Mothers Against Brain Injury, Inc.
(Name of Corporation)

N05000005411, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

Carolyn Leonard
(Signature of resigning officer/director)

FILED
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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