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## **COVER LETTER**

MID TOWN CENTER CONDOMINIUM ASSOCIATION, INC. (Name of Corporation) N07000002709 **DOCUMENT NUMBER:** The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pamela T. Karlson (Name of Person) Pamela T. Karlson, P. A. (Name of Firm/Company) 301 Dal Hall Blvd (Address) Lake Placid, FL 33852 (City/State and Zip Code) For further information concerning this matter, please call: Melissa Barlaug 863 465-5033 ext. 211
(Area Code & Daytime Telephone Number) (Name of Person) Enclosed is a check for \$35.00 made payable to the Florida Department of State. Street Address: Mailing Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations

Post Office Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

, Ira Sugar	, hereby resign as_	Secretary, Treasurer, Directc (Title)
of MID TOWN CENTER CONDO	MINIUM ASSOCIATION, of Corporation)	INC.
(Document Number, if known)	_, a corporation organized un	der the laws of the State of
FLORIDA	_•	
(3	glaure of resigning officer/direct	FILE-C 10 SEP IL AM SECRETARY OF TALLAHASSEE, F

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