## 70010466

	(Requestor's Name)		
	(Address)		
	(Address)		
	(City/State/Zip/Phone #)		
PICK-U	P WAIT	MAIL	
	(Business Entity Name)		
(Document Number)			
Certified Copies	Certificates of	Status	
Special Instructions to Filing Officer:			
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## TRANSMITTAL LETTER

Amendment Section Division of Corporations TO:

1.5

SUBJECT: The Regal Swan Fo	bundat	
(Na	me of Corpo	ration)
DOCUMENT NUMBER: N07000010466	3	
The enclosed Officer/Director Resignation for a	Corporatio	n and fee are submitted for filing
Please return all correspondence concerning this	s matter to t	he following:
William G. Osborne		_
(Name of Person)		
William G. Osborne, P.A.		
(Name of Firm/Company)		_
1305 E. Robinson St.		
(Address)		_
Orlando, FL 32801		
(City/State and Zip Code)		_
For further information concerning this matter,	please call:	
Elizabeth	407	894-1534 de & Daytime Telephone Number)
(Name of Person)	(Area Coo	de & Daytime Telephone Number)
Enclosed is a check for \$35.00 made payable to	the Florida	Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ւ William G. Osborne	hereby resign as Director
	(Title)
of The Regal Swan Found	lation, Inc.
(Name of Corpo	ration)
N0700010466 (Document Number, if known), a cor	poration organized under the laws of the State of
Florida	

## FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to

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

2016 APR 18 P 12: 28