140800006483

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special instructions to Filing Officer:		
·		
-		

Office Use Only

12.38



500188928805

12/23/10--01017--006 **35.00

ALLAHASSEF FIRST



COVER LETTER

SUBJECT: COMMUNITY RESOURCE CENTER, INC (Name of Corporation) N08000006423 **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: JOHN RICH (Name of Person) COMMUNITY RESOURCE CENTER, INC. (Name of Firm/Company) **PO BOX 847** (Address) **AVON PARK, FLORIDA 33826** (City/State and Zip Code) For further information concerning this matter, please call: JOHN RICH (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

I. ARNOLD WILSON	, hereby resign as DIRECTOR	
77	(Title)	
of COMMUNITY RESOURCE CEN	NTER, INC Corporation)	
N0800006423	a corporation organized under the laws of the State of	
FLORIDA		
	mature of resigning officer/director) PEC 23 M 9:	

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