

N09000003590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

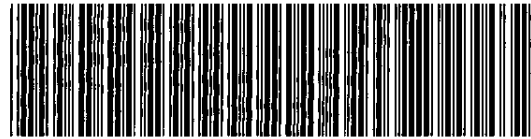
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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800188825328

*Resignation
to officer*

12/20/10--01030--034 **35.00

FILED

2010 DEC 20 PM 5:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Adl
12/22/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Imani Elementary Charter Academy, Inc
(Name of Corporation)

DOCUMENT NUMBER: N09000003590

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

Please return all correspondence concerning this matter to the following:

Dr Patrick C. Coggins

(Name of Person)

Imani Elementary charter Academy, Inc

(Name of Firm/Company)

140 Saddlebrook Way

(Address)

DeLand, FL 32724

(City/State and Zip Code)

For further information concerning this matter, please call:

Dr. Patrick C. Coggins

(Name of Person)

at (561) 707-0766

(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**

FILED

2010 DEC 20 PM 5:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Dr. Patrick C. Coggins, hereby resign as VPD
(Title)

of Imani Elementary Charter Academy, Inc
(Name of Corporation)

N09000003590, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Dr. Patrick C. Coggins
(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