## N090000 9 305

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	- #)
(On	<i>y, 2:0:0:2:p/: 1:011</i> 0	,
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	





700162059687

11/12/09--01002--011 \*\*35.00

1ALLAHASSEE (1.0818-







## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 27, 2009

MICHAEL L. GUDIS 253 NW BAY PATH DR. CRYSTAL RIVER, FL 34428

SUBJECT: CITIZENS FOR RATEPAYERS RIGHTS, INC.

Ref. Number: N09000009305

ð

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

To file a resignation as an officer or director with this office, the enclosed form should be completed and returned with a filing fee of \$35 per person resigning.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist Supervisor

Letter Number: 409A00034012

Michael L. Gudis

253 NW Bay Path Drive

Crystal River, FL 34428

October 16, 2009

Florida Dept of State

**Division of Corporations** 

P O Box 6327

Tallahassee, FL 32314

RE: Resignation- Doc # N09000009305

This is to update your records re Citizens For Ratepayers Rights, Inc.:

Resignation of Michael L. Gudis as Director, Vice President and Treasurer of above named corporation effective immediately.

Thank you for your cooperation

721 AH 8:00

## **COVER LETTER**

Division of Corporations
SUBJECT: CITILENS FOR RATEPAYERS RIGHTS, IUC.  (Name of Corporation)  DOCUMENT NUMBER: N 09000009305
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
SUZAN FRANKS MICHAEL L. 6 VOIS (Name of Person)
Name of Firm/Company)
652 E. DAKOFA CT 253 NW BAY PARG DK.  CKY, KVK. (Address)
(City/State and Zip Code)
For further information concerning this matter, please call:
M, L, G-vol S at (352) 795-2044  (Name of Person) (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

TO:

Amendment Section

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

	GAZSIDENT
1, MICHME L. 6001S, hereby resign as TRENSURER, V.	Floor Legat V
of CTIZENS FOR RATEPAYERS RIGHTS, INC. (Name of Corporation)	
(Document Number, if known), a corporation organized under the laws of the S	tate of
FC.	
	es.
(Signature of resigning officer/director)	SECRETARY ALLAHASSE
	PH 2: 48

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