

N100000003722

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

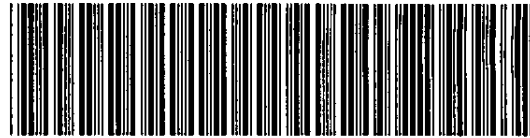
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900266351609

*resignation
of officer*

11/14/14--01031--014 **35.00



SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 NOV 14 PM 1:40

FILED

*ADR
11/14/14*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The St. Augustine Trust for Historic Preservation, Inc.
(Name of Corporation)

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:

Dana Ste. Claire

(Name of Person)

(Name of Firm/Company)

820 Turtle Lake Court

(Address)

Ponte Vedra Beach, FL 32082

(City/State and Zip Code)

For further information concerning this matter, please call:

Lucy Fountain

(Name of Person)

at (904) 825.1006

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

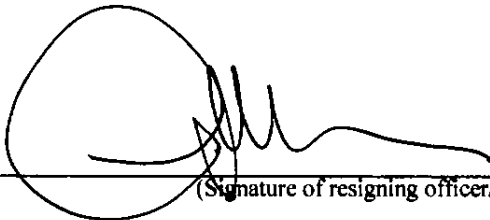
Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

I, Dana Ste. Claire, hereby resign as Director
SECRETARY OF STATE
TALLAHASSEE, FLORIDA (Title)
of The St. Augustine Trust for Historic Preservation, Inc.
(Name of Corporation)
N10000003722, a corporation organized under the laws of the State of
(Document Number, if known)
Florida.


(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