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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

The file ide Divelor	Forth A. L.
SUBJECT: The Florida Blueberry	(Name of Corporation)
DOCUMENT NUMBER: N1000	00007959
The enclosed Officer/Director Resign	ation for a Corporation and fee are submitted for filing.
Please return all correspondence conc	erning this matter to the following:
Michael D. Heard	
(Name of Person	
The Florida Blueberry Festival, In	c.
(Name of Firm/Com	pany)
P.O. Box 308	
(Address)	
Brooksville, Florida 34605-0308	
(City/State and Zip C	Code)
For further information concerning th	is matter, please call:
Michael D. Heard	at ( 941 ) 730-8748
(Name of Person)	at ( 941 ) 730-8748 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made p	payable to the Florida Department of State.
Amendment Section Division of Corporations Clifton Building	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Michael Fitzgerald	, hereby resign as	Director -	
	, notedy resign as_	(Title)	_
of The Florida Blueberry Festival, Ir	nc. Corporation)		. ,
N1000007959		nder the laws of the State of	
Florida			
Sign	nature of resigning officer/direct	SECRETARY OF SIALLAHASSEE, FLORID	

## 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