

N11000005781

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

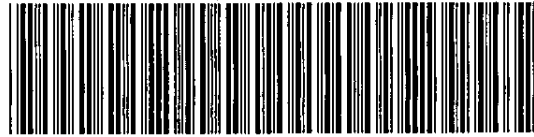
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200235042262

*Designation
to Officer*

05/21/12--01042--008 **35.00

2012 MAY 21 PM 2:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

DOF
5/24/12

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRETHREN OF ST. FRANCIS ANIMAL RESCUE INC
(Name of Corporation)

DOCUMENT NUMBER: N11000005781

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

Please return all correspondence concerning this matter to the following:

NORA THOMPSON

(Name of Person)

(Name of Firm/Company)

3616 HARDEN BLVD SUITE 318

(Address)

LAKELAND FL 33803

(City/State and Zip Code)

For further information concerning this matter, please call:

BILLY FUESHKO

(Name of Person)

at (813) 601 3856

(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

2012 MAY 21 PM 2:03

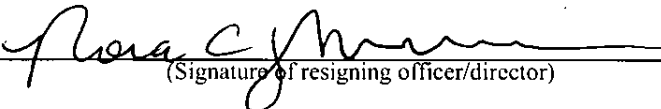
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

I, Nora Thompson, hereby resign as SECRETARY
(Title)

of BRETHREN OF ST. FRANCIS ANIMAL RESCUE INC
(Name of Corporation)

N11000005781, 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