(F	Requestor's Name)
· (A	Address)
<u> </u>	Address)
(C	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(E	Business Entity Name)
(Document Number)	
Certified Copies	Certificates of Status
Special Instructions to Filing Officer:	
,	





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07/30/08--01015--015 \*\*35.00

officer Presignation
TB 8/6/08

## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: SAN REMO GOLF & TENNIS CLUB CONDOMINIUM
(Name of Corporation)
DOCUMENT NUMBER: N11829
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
John Aske
(Name of Person)
San Remo Golf & Tennis Club Condominium
(Name of Firm/Company)
5151 E Club Circle E
(Address)
Boca Raton, FL 33487
(City/State and Zip Code)
For further information concerning this matter, please call:
James Calderazzo at (954) 753-7966 Ext 141 (Name of Person) (Area Code & Daytime Telephone Number)
(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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

ZOOB JUL 30 AM II: 56
TALLAHASSEE. FLORIDA

I, John Aske	, hereby resign as(Title)
of_San Remo Golf & Tennis Cl	ub Condominium Association, Inc.
N11829 (Document Number, if known)	, a corporation organized under the laws of the State of
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