

N1200000 5164

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

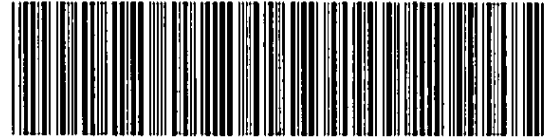
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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CLERK OF STATE  
DIVISIONS

old Resignation

AUG 11 2020

D CUSHING

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** VICTORY ACADEMY OCALA INC.  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** N12000005164  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

DIANNE VANFLEET  
\_\_\_\_\_  
(Name of Person)

VICTORY ACADEMY OCALA INC.  
\_\_\_\_\_  
(Name of Firm/Company)

5124 NE 7TH PLACE  
\_\_\_\_\_  
(Address)

OCALA, FL 34470  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

DIANNE VANFLEET at (352) 804-3639  
\_\_\_\_\_  
(Name of Person) (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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

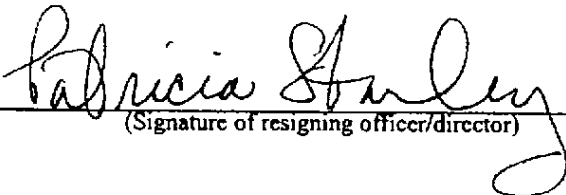
2011-05-11 11:45  
DIVISION OF CORPORATIONS  
STATE OF FLORIDA

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, PATRICIA STANLEY, hereby resign as VICE PRESIDENT  
(Title)

of VICTORY ACADEMY OCALA INC.  
(Name of Corporation)

NI2000005164, 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

20 JUL -6 AM 11:45