Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: MCLEOD, MCLEOD & MCLEOD, P.A.

Account Number : 076635001571

Phone

: (407)886-3300

Fax Number : (407)886-0087

Enter: the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

COR AMND/RESTATE/CORRECT OR O/D RESIGN JOHN LAND APOPKA COMMUNITY TRUST, INC.

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Electronic Filing Menu

Corporate Filing Menu

Help

4,

(((H15000210006 3)))

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: John Land Apopka Community Trust, Inc.

(Name of Corporation)

DOCUMENT NUMBER: N13000001333

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

Please return all correspondence concerning this matter to the following:

TRAymondo A. Milleou (Name of Person)

Muleou Law Firm
(Name of Firm/Company)

Post Diffice Drawer 95D

APOPKA FL 32704-U950
(City/State and Zip Code)

For further information concerning this matter, please call:

Taymowo A. Wellowd at (407) 886-3300 ext. # 105

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

CR2E044 (05/13)

407-886-0087

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OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Bill McLeod	, hereby resign as Director
John Land Apopka	Community Trust, Inc.
of (Name	e of Corporation)
N13000001333 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	_

FILING FEE IS \$35.00

(Signature of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314