

**N13000004502**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**

**OCT 7 2013**

**EXAMINER**

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Knight's Christian Academy, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** N13000004502

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

Please return all correspondence concerning this matter to the following:

**Wanda Conley**

(Name of Person)

**Knight's Christian Academy**

(Name of Firm/Company)

**PO Box 569**

(Address)

**Edgewater, FL 32132**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Wanda Conley**

(Name of Person)

at ( **386** ) **426-0800**

(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  
2661 Executive Center Circle  
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**

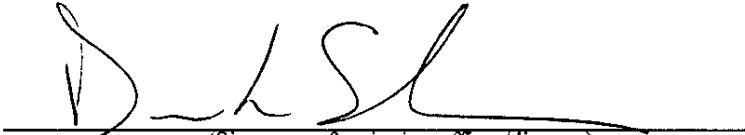
13 SEP 30 PM 1:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Deborah L Shover, hereby resign as Director  
(Title)

of Knight's Christian Academy, Inc.  
(Name of Corporation)

N13000004502, 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