## 11300000557

(Req	uestor's Name)	
(Add:	ress)	
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(City/	/State/Zip/Phon	e #)
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## TRANSMITTAL LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: HARVEST OF CHRIST CENTRAL, INC			
(Name of Corporation)			
DOCUMENT NUMBER: N13000006557			
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing			
Please return all correspondence concerning this matter to the following:			
(Name of Person)			
UNITED STATES CORPORATION AGENTS, INC			
(Name of Firm/Company)			
13302 WINDING OAKS BLVD SUITE A			
(Address)			
TAMPA, FL 33612			
(City/State and Zip Code)			
For further information concerning this matter, please call:			
LONNIE R JOHNS at (386 )867-0038			
(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
Tallahassec, FL 32314

Street Address: Amendment Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

LONNIE JOHNS	TREASURER DIRECTOR
	(Title)
HARVEST OF CHE	RIST CENTRAL, INC.
N13000006557	_, a corporation organized under the laws of the State of
	ignature of resigning officer/director)  ILING FEE IS \$35.00
Make checks payable	to Florida Department of State and maikto:

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