N14000005979

(Re	equestor's Name)	
`		
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #	9)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates o	f Status
Special Instructions to	Filing Officer:	
		į
gi sa e	Office Use Only	



400266822584

11/26/14--01007--010 **35.00

14 NOV 28 PM 3. E.

C.L. 5-14

TRANSMITTAL LETTER

Division of Corporations		
SUBJECT: Treasure Coast Performing Arts Center, Inc. (Name of Corporation)		
DOCUMENT NUMBER: N 1400000 5979		
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin		
Please return all correspondence concerning this matter to the following:		
MACGARET MOORE (Name of Person)		
(Name of Firm/Company) 131 Yacht Club way # 306 (Address)		
Hypoloxo, FL 33462 (City/State and Zip Code)		
For further information concerning this matter, please call:		
MArgaret L. Moore at (561) 315-7368 (Name of Person) at (561) 315-7368 (Area Code & Daytime Telephone Number)		
Enclosed is a check for \$35.00 made payable to the Florida Department of State.		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 63272661 Executive Center CircleTallahassee, FL 32314Tallahassee, FL 32301		

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

SECRETARY OF STATE DIVISION OF CORPORATIONS

14 NOV 26 PM 3:51

I, _	MAGGARET L. MOORE, hereby resign as Vice President (Title)
of_	Treasure Coast Performing Arts, Center, Inc. (Name of Corporation)
_	(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