

N140000007139

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

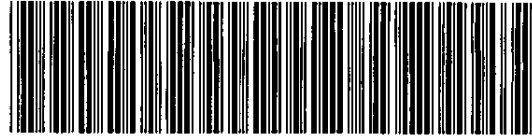
(Business Entity Name)

(Document Number)

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CRM  
5-1-15

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LOCAL FOOD PARK INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N14000007139

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

Please return all correspondence concerning this matter to the following:

Carol Smith

(Name of Person)

Local Food Park Inc.

(Name of Firm/Company)

6037 21st Ave N

(Address)

St Petersburg FL 33710

(City/State and Zip Code)

For further information concerning this matter, please call:

Carol Smith

(Name of Person)

at ( 727 ) 804-0694

(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**

I, Annette Hubbard, hereby resign as Treasurer  
(Title)

of Local Food Park Inc.  
(Name of Corporation)

N14000007139, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Annette Hubbard 3-31-15  
(Signature of resigning officer/director)

FILED  
15 APR 24 AM 7:28

**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