

N15 000000 692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

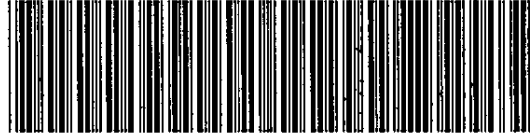
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

5/18/16

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Barefoot Beach Resort of Indian Shores Boat Slip Association Inc.
(Name of Corporation)

DOCUMENT NUMBER: N15000000692

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

Please return all correspondence concerning this matter to the following:

Steve Gianfilippo

(Name of Person)

Barefoot Beach Resort of Indian Shores Boat Slip Association Inc.

(Name of Firm/Company)

4830 W Kennedy Blvd Ste 445

(Address)

Tampa, FL 33609

(City/State and Zip Code)

For further information concerning this matter, please call:

Steve Gianfilippo at **(813) 902-9038**
(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
Tallahassee, FL 32314

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

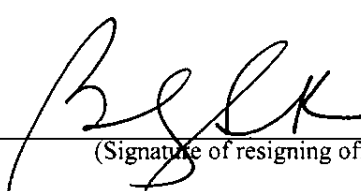
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Beverly Smoak, hereby resign as Secretary
(Title)

of Barefoot Beach Resort of Indian Shores Boat Slip Association Inc,
(Name of Corporation)

N 15000000692, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILED
2018 MAY 16 PM 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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