N47043

(Re	equestor's Name)	
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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

UBJECT: Community Access to Child Health of Brevard, Inc.
(Name of Corporation)
OCUMENT NUMBER: N47043
he enclosed Officer/Director Resignation for a Corporation and fee are submitted for filin
lease return all correspondence concerning this matter to the following:
_isa Gemmill
(Name of Person)
Community Access to Child Health of Brevard, Inc.
(Name of Firm/Company)
2565 Judge Fran Jamieson Way
(Address)
√iera, Florida 32940
(City/State and Zip Code)
or further information concerning this matter, please call:
isa Gemmill at (321) 639-5864 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
nclosed is a check for \$35.00 made payable to the Florida Department of State.
mendment Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, <u>Kevin Foley</u>	, hereby resign as Treasurer/Director	
	(Title)	
of Community Access to Child Health of B	revard, Inc.	
(Name of Corporation	on)	
N47043	, a corporation organized under the laws of the State of	
(Document Number, if known)		
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