

N95000002994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** BOACU RACE OF INDIAN SHORES CONDO ASSN, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N 9500000 2994

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

Please return all correspondence concerning this matter to the following:

EDWARD W. GERECKE  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

3923 W. SAN JUAN ST.  
(Address)

TAMPA, FL 33629  
(City/State and Zip Code)

For further information concerning this matter, please call:

EDWARD W - GERECKE at (813) 229-4306  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

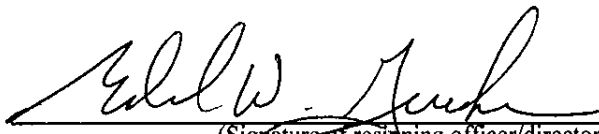
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, ED W GERECKE, hereby resign as DIRECTOR  
(Title)

of BEACH PLACE OF INDIAN SHORES CONDOMINIUM  
(Name of Corporation) Association, Inc.

N95000002994, a corporation organized under the laws of the State of  
(Document Number, if known)

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