N98000000488

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
[
Special Instructions to Filing Officer:	
·	

Office Use Only



200117809862

02/14/08--01016--004 **35.00

DE FEGIL PH 4: 11
SECRETARY OF STAIL
ALLAHASSEE. FLORIDA

Officer Rusign Crimmurphy 2/20/08

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Word Centered Fell	owship, Inc.
	(Name of Corporation)
DOCUMENT NUMBER: N98	000000488
The enclosed Officer/Director Resi	gnation for a Corporation and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Patrick T. Powell	
(Name of Per	son)
Word Centered Fellowship, Inc	
(Name of Firm/Co	ompany)
P.O.Box 10877	
(Address)	
Brooksville, FL 34603	
(City/State and Zi	p Code)
For further information concerning	this matter, please call:
Patrick Powell	at (352) 797-0506 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 mag	de 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

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, BRIDGET BLAKE	, hereby resign as SECRETAP	//TPEASUREP
	FELLOWSHIP, INC. of Corporation)	,
N98000000 4 8 8 (Document Number, if known)	, a corporation organized under the laws of t	the State of
FLOPIDA	_·	
- m	ruget Slake Signature of resigning officer/director)	FILED 08 EBIL PM 4: 11 SECRETARY OF STAIL 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