P00000081819

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

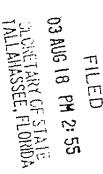
Office Use Only



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08/18/08--01062--011 **105.00

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TRANSMITTAL LETTER

Division of Corporation	ons			
SUBJECT: Tops Mortgage	e Inc.		ration)	- <u>- </u>
	(Na	ime of Corpor	ation)	
DOCUMENT NUMBER:_	P00000081819) 		pile 77 company
The enclosed Officer/Director	r Resignation for a	a Corporation	and fee are s	ubmitted for filing
Please return all corresponder	nce concerning thi	s matter to th	ne following:	
FRED E CASSIDY	of Person)	· - ··· -	<u>-</u>	where the second
(1 mixes	01 2 0200,		<u>-</u> _	
TOPS MORTGAGE INC		<u> </u>	-	in the second
(Name of F	irm/Company)		2	
205 JOEL BLVD	dress)	ف .	_	
(Ad	dress)			
LEHIGH ACRES FL 3397				
(Čity/State	and Zip Code)		_	
For further information conce	rning this matter,	please call:	_	
ROBERT M WOLFE	on) at	239	368-9999	.≊
(Name of Perso	on)	(Area Cod	e & Daytime Te	elephone Number)
Enclosed is a check for \$35.0	0 made payable to	the Florida	 Department of	State.

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314



OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, FRED CASSIDY	, hereby resign as VICE PRESIDENT		
**	(Title)		
of_TOPS MORTGAGE, INC.			
(Name	of Corporation)		
(Document Number, if known)	a corporation organized under the laws of the State of		
FLORIDA			
-/-	179		
	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