

P000000090215

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

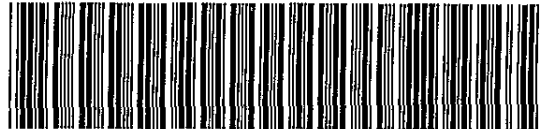
(Business Entity Name)

(Document Number)

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O/D Resign.
Jgm
1/7/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TALISMAN FINANCIAL CORPORATION, INC.
(Name of Corporation)

DOCUMENT NUMBER: P00000090215

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

Please return all correspondence concerning this matter to the following:

GARY R. TROYAN, President

(Name of Person)

TALISMAN FINANCIAL CORPORATTION, INC.

(Name of Firm/Company)

736 Island Way #704

(Address)

Clearwater Beach, FL 33767

(City/State and Zip Code)

For further information concerning this matter, please call:

GARY R. TROYAN

(Name of Person)

at (727)

462-5793

(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
409 E. Gaines Street
Tallahassee, FL 32399


**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BARBARA E. OLSON, hereby resign as PRESIDENT
(Title)

of TALISMAN FINANCIAL CORPORATION, INC.
(Name of Corporation)

P00000090215, 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

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