

PD1000063470

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

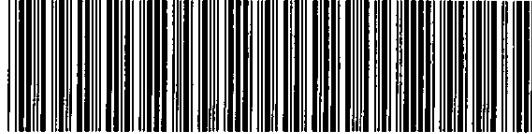
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Resign*

C.COULLIETTE

DEC 18 2008

EXAMINER

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: BARRY SCOTT, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P 010666 63470

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

Please return all correspondence concerning this matter to the following:

BARRY L. SCOTT  
(Name of Person)

BARRY SCOTT INC.  
(Name of Firm/Company)

916 NE 26 COURT  
(Address)

OCALA, FL 34470  
(City/State and Zip Code)

For further information concerning this matter, please call:

SANDY SCOTT at ( 352 ) 266-4126  
(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

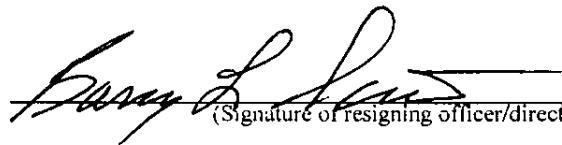
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, BARRY L. SCOTT, hereby resign as PRES/D  
(Title)

of BARRY SCOTT, INC.  
(Name of Corporation)

P01000063470, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(Signature of resigning officer/director)

**FILED**  
**08 DEC 16 AM 10:52**  
SECRETARY OF STATE  
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