

PO1000110570

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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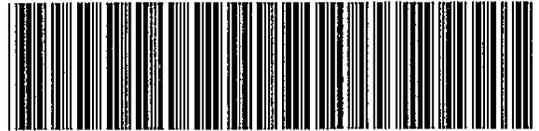
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS  
06 JAN 31 PM 2:14

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a/p. l. s.

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Empowerment Partnership, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** PD1000110570

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

Please return all correspondence concerning this matter to the following:

David W. Southwell  
(Name of Person)

Creative Asset Protection Strategies, Inc.  
(Name of Firm/Company)

16191 NW 57th Avenue  
(Address)

Miami, FL 33014  
(City/State and Zip Code)

For further information concerning this matter, please call:

David Southwell at ( 305 ) 621-0220  
(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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

06 JAN 31 PM 2: 14

I, David W. Southwell, hereby resign as Executive Director  
(Title)

of The Empowerment Partnership, Inc.  
(Name of Corporation)

PO1000110570, 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