P02000081742

(Requ	uestor's Name)	
(Addr	ess)	
(Addr	ess)	
(* 1881	000,	
. (City/	State/Zip/Phone	e #) ·
PICK-UP	WAIT	MAIL
/Buci	ness Entity Nan	no)
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(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fil	ling Officer:	
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03/10/08--01056--016 **35.00

officer Resignation
TB 3-12-1

COVER LETTER

Amendment Section Division of Corporations

TO:

St. Lucia Back Waterfalls inc
SUBJECT: St. Lucie Rock Waterfalls Inc. (Name of Corporation)
DOCUMENT NUMBER: P02000081742
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fili
Please return all correspondence concerning this matter to the following:
Thomas C. Cseak Jr.
(Name of Person)
St. Lucie Rock Waterfalls Inc.
(Name of Firm/Company)
655 S.W. Heather St.
(Address)
Port Saint Lucie , Florida 34983
(City/State and Zip Code)
For further information concerning this matter, please call:
Thomas C. Cseak Jr. 772 370-7571
Thomas C. Cseak Jr. at (772) 370-7571 (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

2008 MAR 10
TALLAHASSEE, FLORIDA
esident

_{I.} Brian Gallery	hereby resign as Vice President	
7	(Title)	
of St. Lucie Rock Waterfall	nc.	
<u> </u>	Name of Corporation)	
P02000081742	, 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