

PD2000119872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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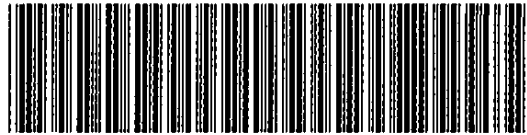
(Business Entity Name)

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T. Roberts JAN 03 2007

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CENTRAL FLORIDA CHOPPERS  
(Name of Corporation)

**DOCUMENT NUMBER:** PD20000119872

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

Please return all correspondence concerning this matter to the following:

VICTOR T. RIVERA  
(Name of Person)

CENTRAL FLORIDA CHOPPERS  
(Name of Firm/Company)

2609 S. ORANGE AVE.  
(Address)

ORLANDO, FL. 32806  
(City/State and Zip Code)

For further information concerning this matter, please call:

VICTOR T. RIVERA at ( 407 ) 256-3394  
(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  
06 DEC 26 PM 12:56**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

I, Robert Dixon, hereby resign as President  
(Title)

of Central Florida Choppers, Inc.  
(Name of Corporation)

7020000119872, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Robert Dixon  
(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