## P02000126885

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- (R	equestor's Name)		
(A	ddress)		
, (A	ddress)		
, (C	ity/State/Zip/Phone	e #)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: CHARZ AQUATIC, I	NC.
	(Name of Corporation)
DOCUMENT NUMBER: P020	000126885
The enclosed Officer/Director Resig	gnation for a Corporation and fee are submitted for filing
Please return all correspondence cor	ncerning this matter to the following:
JAMES H COLLIER SR	
(Name of Pers	on)
COLLIER'S ACCOUNTING SE	RVICE, INC.
(Name of Firm/Co	mpany)
14055 TENNYSON DRIVE	
(Address)	<del></del>
HUDSON, FL 34667	
(City/State and Zip	o Code)
For further information concerning	this matter, please call:
JAMES H COLLIER SR	at ( 727 ) 862-9700
(Name of Person)	at ( 727 ) 862-9700 (Area Code & Daytime Telephone Number)
Enclosed is a check for \$35.00 made	e payable to the Florida Department of State.
Street Address: Amendment Section	Mailing Address: Amendment Section
Division of Corporations	Division of Corporations
Division of Corporations Clifton Building	Post Office Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. TERESE R. SYLVESTER	, hereby resign as_	DIRECTOR
	, <b>,.</b>	(Title)
of CHARZ AQUATIC, INC.		
	ne of Corporation)	
P02000126885 (Document Number, if known)	a corporation organized under the laws of the State of	
FLORIDA		

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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