

P02000135090

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

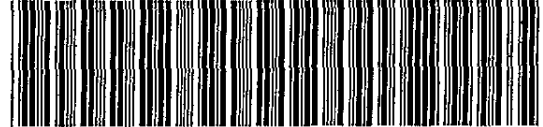
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

corrected corp
name *[signature]*

Office Use Only



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06/07/04--01018--010 **35.00

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04 JUN -7 AM 8:42
CLERK OF STATE
TALLAHASSEE, FLORIDA

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6 6/15/04*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Pinnacle Promotions of Jacksonville, Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Donald Workman

(Name of Person)

Pinnacle Promotions of Jacksonville, Inc.

(Name of Firm/Company)

468 Aquatic Dr.

(Address)

Atlantic Beach, FL 32233

(City/State and Zip Code)

For further information concerning this matter, please call:

Donald Workman

(Name of Person)

at (904) 242-8825

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Donald Workman, hereby resign as Officer or any other position
(Title)

of Pinnacle Promotions, Inc. of Jacksonville
(Name of Corporation)

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

Florida

*I RESIGNED FROM THIS CORPORATION AS OF
DEC 31, 2003*

Donald Workman
(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

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TALLAHASSEE, FLORIDA