

PO30000015489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

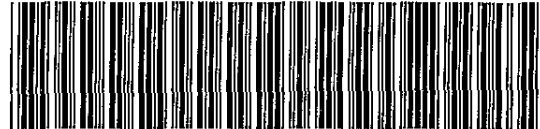
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100014441721

03/26/03--01049--004 **35.00

FILED
03 MAR 26 AM 11:54
TAMPA STATE
LIAMASSEE, FLORIDA

Rs 4/2/03

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Abilities Support Coordination, Inc
(Name of Corporation)

DOCUMENT NUMBER: P03000015489

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

Please return all correspondence concerning this matter to the following:

Janet Tynes
(Name of Person)

Abilities Support Coordination, Inc.
(Name of Firm/Company)

13931 SW 122 Ave Apt. #207
(Address)

Miami, Florida 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

Janet Tynes at (786) 344-4341
(Name of Person) (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**

FILED

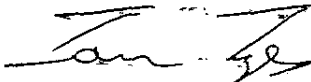
03 MAR 26 AM 11:55

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

I, Ian Tynes, hereby resign as Vice President
(Title)

of Abilities Support Coordination, Inc.
(Name of Corporation)

P03000015489, 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