P0200038546

(Requestor's Name)
(Address)
· ·
(Áddress)
(Mudless)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Daomess Effet) Harris
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



700031977157

04/07/04--01016--012 **35.00

OL APR -7 PM 1:31

R 4/14/04

TRANSMITTAL LETTER

Division of Corporations	
SUBJECT: ROPERTY XX (Name of Corporation)	= ————
DOCUMENT NUMBER: Po3000038546	_
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for	or filing.
Please return all correspondence concerning this matter to the following:	
(Name of Person) ROPELTY TAX INC. (Name of Firm/Company)	
(Name of Firm/Company) Po. Box 33545 (Address)	n Sectors
THOIRMIT (C F1 32903 (City/State and Zip Code) For further information concerning this matter, please call:	
(Name of Person) at (321) 674-9000 (Area Code & Daytime Telephone N	umber)

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

Amendment Section

TO:

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

FILED OFFICER / DIRECTOR RESIGNATION R - 7 PM 1:31 FOR A CORPORATION IALLAHASSEE STATE

I, FRAD LOWRENCE	, hereby resign as VICE - PREFIDENT
of TROPERTY (Name of Corpo	oration)
Po 30000 38 546 , a con (Document Number, if known)	poration organized under the laws of the State of
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