

PD3000069727

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

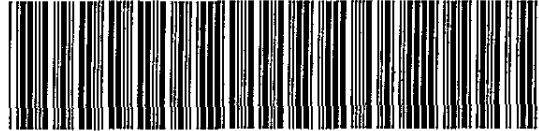
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

OD/Res
(10) 2/5/04



200027592132

01/30/04--01053--010 **35.00

FILED
04 JAN 30 PM 12:10
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WALKRAFT, INC.
(Name of Corporation)

DOCUMENT NUMBER: P03000069727

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

Please return all correspondence concerning this matter to the following:

Judy L. DUTROW
(Name of Person)

(Name of Firm/Company)

36430 Shady Lane
(Address)

DADE City, FL 33525
(City/State and Zip Code)

For further information concerning this matter, please call:

Judy L. DUTROW at 359 , 523-3636
(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

FILED
04 JAN 30 PM 12:10
TALLAHASSEE, FLORIDA

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

Judy L. Dutrow, hereby resign as Vice President
(Title)

of WALKRAFT, Inc.
(Name of Corporation)

P03000069727, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Judy L. Dutrow
(Signature of resigning officer/director)

FILED
04 JAN 30 PM 12:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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