

PD3000076753

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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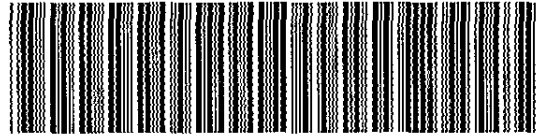
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TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SUNCOAST GREAT RIVER GROVES, INC.
(Name of Corporation)

DOCUMENT NUMBER: 703000076753

The enclosed Officer/Director Resignation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

TY WILKINSON

(Name of Person)

SUNCOAST GREAT RIVER GROVES, INC.

(Name of Firm/Company)

7119 SOUTH TAMiami TRAIL

(Address)

SARASOTA, FLORIDA 34231

(City/State and Zip Code)

For further information concerning this matter, please call:

TY WILKINSON

(Name of Person)

at

()

928-2201

(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

CR/PCW (2)

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, CHALG BRIVIK, hereby resign as OFFICER/DIRECTOR
(Title)
of SUNCOAST GREAT RIVER GROVES, INC.
(Name of Corporation)
9030030/5753 a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA


(Signature of Officer/Director)

FILING FEE IS \$35.00**Make checks payable to Florida Department of State and mail to:**

Amendments Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA