

P03000098899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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07/02/07--01040--032    \*\*35.00

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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OLD Resign.

07-11-07

DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Community Management Specialists, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P03000098899

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

Please return all correspondence concerning this matter to the following:

Kevin M. Davis

(Name of Person)

Community Management Specialists

(Name of Firm/Company)

1750 West Broadway Street Suite 220

(Address)

Oviedo, FL 32765

(City/State and Zip Code)

For further information concerning this matter, please call:

Kevin M. Davis

(Name of Person)

at ( 407 ) 359-7202

(Area Code & Daytime Telephone Number)

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

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Laura Davis, hereby resign as Vice President  
(Title)

of Community Management Specialists, Inc.,  
(Name of Corporation)

P03000098899, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida

Laura Davis  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**

**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