

P03000 108952

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2005 JAN 10 PM 3:19

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

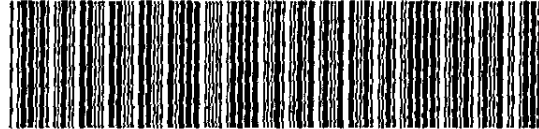
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100043731961

*AS*

01/10/05--01008--016 \*\*70.00

*o/d resig.*

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** West Central Cabinets Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** P03000108952

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

Please return all correspondence concerning this matter to the following:

LORI BROWN  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

610 Kingmill Cove, Unit 204  
(Address)

Lake Mary FL 32746  
(City/State and Zip Code)

For further information concerning this matter, please call:

LORI BROWN at 407 399-5538  
(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  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

2005 JAN 10 PM 3:19

I, Lori Brown, hereby resign as Treasurer  
(Title)

of West Central Cabinets, Inc.  
(Name of Corporation)

P03000108952, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Lori Brown  
(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