## P03000135468

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	∍#)
		<u></u>
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	<del></del>
Certified Copies	_ Certificates	of Status
Consist Instructions to	Filing Officer	
Special Instructions to	Filing Officer.	



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12/02/03--01056--002 \*\*35.00

FILED

03 DEC -2 PH 4: 29

SECRETARY OF STATE

Micer Resignation

Office Use Only

\* BROWN DEC - 9 2003

## TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

UBJECT: STEVE PERRY INC. (Name of Corporation)
OCUMENT NUMBER: P03000/35468
he enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
STEUE PERRY (Name of Person)
STEVE PERRY INC  (Name of Firm/Company)
(Address)
MELBOURNE FI 32935 (City/State and Zip Code)
or further information concerning this matter, please call:
STEUE PERRY at (407) 687-1800 (Name of Person) (Area Code & Daytime Telephone Number)

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

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

CR2E044(11/02)

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

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TALLAHASSEE, FLORIDA

I, PEARL J. HITCHCOC	K, hereby resign as SECRETIARY (Title)
of STEVE PERRY (Name of Corpo	/NC.
PO 3000135468 a cor (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