

P04000011182

(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



500038103765

06/21/04--01025--019 **35.00

FILED
04 JUN 21 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Officer Resignation

T BROWN JUN 28 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ancient City Marine Repair, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 9040000 11182

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

Please return all correspondence concerning this matter to the following:

Charlotte A. Smith

(Name of Person)

Ancient City Marine Repair, Inc.

(Name of Firm/Company)

205 SR 207

(Address)

St. Augustine, FL 32084

(City/State and Zip Code)

For further information concerning this matter, please call:

Charlotte A Smith

(Name of Person)

at (904) 669-3183
(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
04 JUN 21 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Charlotte A Smith, hereby resign as president
(Title)

of Ancient City Marine Repair, Inc.
(Name of Corporation)

P04000011182, a corporation organized under the laws of the State of
(Document Number, if known)
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