

P04000015677

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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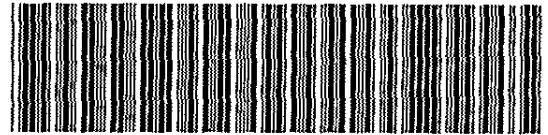
(Business Entity Name)

(Document Number)

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Es 5/12/04
P.D. Les.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Tropical Accommodations, Inc.
(Name of Corporation)

DOCUMENT NUMBER: 904000015677

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

Please return all correspondence concerning this matter to the following:

JERI L. SHAW
(Name of Person)

TROPICAL ACCOMMODATIONS, INC
(Name of Firm/Company)

921 EATON ST
(Address)

Key West FL 33040
(City/State and Zip Code)

For further information concerning this matter, please call:

JERI L. SHAW at (305) 296 6006
(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**

I, Richard E. Shaw, hereby resign as President
(Title)

of TROPICAL ACCOMMODATIONS, INC.
(Name of Corporation)

904000015677, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Richard E. Shaw
(Signature of resigning officer/director)

FILED
04 MAY -6 PM 1:20
TALLAHASSEE, FLORIDA
CLERK OF STATE

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