

PO4000018642

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

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TALLAHASSEE FLORIDA

11/13/06

10

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Trinity of Jacksonville, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO 400018642

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

Please return all correspondence concerning this matter to the following:

Mr. Tom Rowand
(Name of Person)

Trinity of Jacksonville, INC.
(Name of Firm/Company)

233 E Bay St. # 920
(Address)

Jacksonville Florida 32202
(City/State and Zip Code)

For further information concerning this matter, please call:

Tom Rowand at (904) 962-2454
(Name of Person) (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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 27, 2006

TOM ROWAND
233 E BAY ST #920
JACKSONVILLE, FL 32202

SUBJECT: TRINITY OF JACKSONVILLE, INC.
Ref. Number: P04000018642

We have received your document for TRINITY OF JACKSONVILLE, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fee to file your document is \$35.

There is a fee of \$10.00 due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist

Letter Number: 406A00063948

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Curtis T Rector, hereby resign as President
(Title)

of Trinity of Jacksonville, Inc.
(Name of Corporation)

P04000018642, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Curtis T Rector
(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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