

P04000063015

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

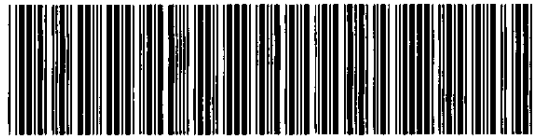
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

*W. P. ...
2/5/10*

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Coast to Coast Elevator, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P04000063015

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Carolyn McFarland

(Name of Person)

Coast to Coast Elevator, Inc.

(Name of Firm/Company)

1468 NW 153 Avenue

(Address)

Pembroke Pines, FL 33028

(City/State and Zip Code)

For further information concerning this matter, please call:

Joey McFarland at (954) 775-6530

(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

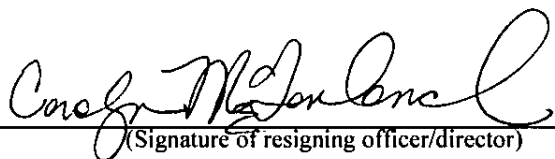
I, Carolyn McFarland, hereby resign as President/CEO
(Title)

of Coast to Coast Elevator, Inc.
(Name of Corporation)

P04000063015, a corporation organized under the laws of the State of
(Document Number, if known)

Florida

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 2/3/2010
(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