

P04000077530

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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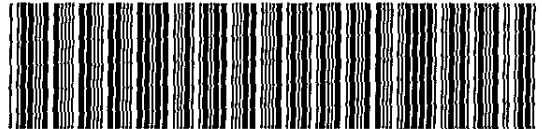
(Business Entity Name)

(Document Number)

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04 JUL -9 PM 11:59
SEATTLE
FALLS

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BRUCE E. PATNODE, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000077530

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

Please return all correspondence concerning this matter to the following:

Bruce E. Patnode, President
(Name of Person)

BRUCE E. PATNODE, INC.
(Name of Firm/Company)

P.O. Box #4246
(Address)

Ocala, FL 34478-4246
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce E. Patnode at (352) 694-9800
(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

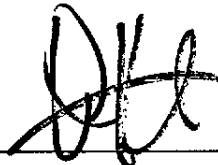
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RESIGNATION OF DIRECTOR

FILED
04 JUL -9 AM 11:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Daniel J. Wade, after being duly sworn, state that to the best of my knowledge, information and belief, and under the penalties of perjury, the following is true and correct:

I, Daniel J. Wade, hereby tender my resignation as **Director** of **BRUCE E. PATNODE, INC.**, a corporation organized and operating under the laws of the State of **FLORIDA**, to take effect **June 10, 2004**, and that the corporation has been notified in writing of this resignation.



DANIEL J. WADE

ACKNOWLEDGEMENT

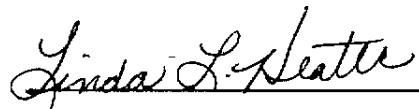
STATE OF FLORIDA
COUNTY OF MARION

BEFORE ME, a Notary Public authorized to take acknowledgements within the state and county set forth above, personally appeared

DANIEL J. WADE,

known by me and known by me to be the person who executed the foregoing
Resignation of Director.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal
within the state and county aforesaid, this **10nd day of June, 2004**.



Notary Public

State of FLORIDA at Large

My commission expires:

