P04000143036

(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



300051507083

DIVISION OF CORPORATIONS
2005 APR 26 AM 8: 30

(4, 26, 65--011119--02) *** 00

o/p resig.

TRANSMITTAL LETTER

Division of Corporations
SUBJECT: Core Title Services Inc. (Name of Corporation)
DOCUMENT NUMBER: \$0 4000 143 036
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Kathryn To' Brien (Name of Person)
Core Title Services, Inc. (Name of Firm/Company)
9931 GS Casas Prive
Fort Myers, Florida 339/9 (City/State and Zip Code)
For further information concerning this matter, please call:
Peter Albert at (239) 908-5626 (Name of Person) (Area Code & Daytime Telephone Number)

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

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

TO:

Amendment Section

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I,	Kathryn T. O'Brien, hereby resign as VP	_
	(Title)	
of	Core Title Services, Inc. (Name of Corporation)	,
	10 4000 143 036, 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