

P04000146742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

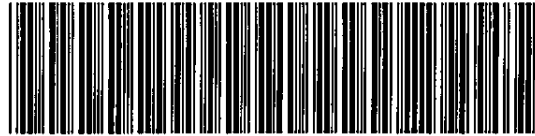
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400081076704

10/25/06--01018--001 **35.00

FILED
06 OCT 23 AM 9:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06/25/06
10-25-06
02-52-01

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: STANNARD BROTHERS MOVING, INC.
(Name of Corporation)

DOCUMENT NUMBER: P04000146742

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

Please return all correspondence concerning this matter to the following:

ROBERT STANNARD

(Name of Person)

STANNARD BROTHERS MOVING, INC.

(Name of Firm/Company)

17815 BRIAR PATCH TRAIL

(Address)

BOCA RATON, FL. 33487

(City/State and Zip Code)

For further information concerning this matter, please call:

CRAIG STANNARD

(Name of Person)

at (954) 868-8131

(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, ROBERT STANNARD, hereby resign as PRESIDENT
(Title)

of STANNARD BROTHERS MOVING, INC.
(Name of Corporation)

P04000146742, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.


(Signature of resigning officer/director)

FILED
06 OCT 23 AM 9:19
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