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(City/State/Zip/Phone #)

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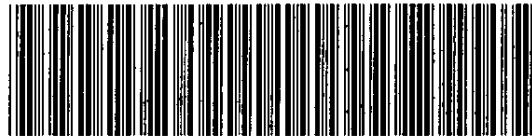
(Business Entity Name)

(Document Number)

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08 JUL 10 PM 1:23

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

67/11/08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Southeast Mutual Insurance and Investment Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 52-2450372

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

Please return all correspondence concerning this matter to the following:

Donald R Babb

(Name of Person)

Southeast Mutual Insurance and Investment Inc

(Name of Firm/Company)

259 McLeod St

(Address)

Merritt Island, FL 32953

(City/State and Zip Code)

For further information concerning this matter, please call:

Donald R. BAbb

(Name of Person)

at ( 321 ) 453-3594

(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, Brian D. Glowacki, hereby resign as (Sec/Tr) ST  
(Title)

of Southeast Mutual Insurance and Investment Inc  
(Name of Corporation)

52-2450372, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

B. D. Glowacki July 8, 2008  
(Signature of resigning officer/director)

**FILED**  
08 JUL 10 PM 1:28  
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