P05000026916

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Do	cument Number)	·
Certified Copies	Certificates	s of Status
Special Instructions to I	Filing Officer:	





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MAR 2 3 2012 T. BROWN

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Community Management Professionals West, Inc.
(Name of Corporation)
DOCUMENT NUMBER: P05000026916
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Joan M. Smith
(Name of Person)
Community Management Professionals West, Inc.
(Name of Firm/Company)
12029 Majestic Blvd., Suite 2
(Address)
Bayonet Point, FL 34667
(City/State and Zip Code)
For further information concerning this matter, please call:
Joan M. Smith at (727) 215-7237 (Name of Person) (Area Code & Daytime Telephone Number)
(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

TOTZ MAR 22 AM 9: 37
TALLAHASSEE, FLORIDA

I,	, hereby resign as Vice President/ T
	(Title)
of Community Management Pr	ofessionals West, Inc.
	ne of Corporation)
P05000026916 (Document Number, if known)	, a corporation organized under the laws of the State of
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