

POS0000039228

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

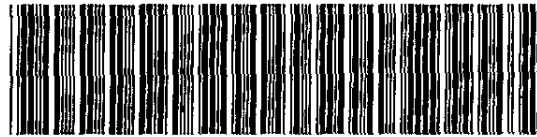
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600057968796

08/01/05--01014--021 \*\*35.00

FILED  
05 AUG -1 PM 3:26  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

08 01 2005

00

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Florida Dive Show, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** 10 5000039228

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

Please return all correspondence concerning this matter to the following:

Brad Nolan  
(Name of Person)

The Florida Dive Show, Inc.  
(Name of Firm/Company)

PO Box 14808  
(Address)

North Palm Beach, FL 33408  
(City/State and Zip Code)

For further information concerning this matter, please call:

Brad Nolan at ( 888 ) 55 Scuba  
(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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Paula O. Johnson hereby resign as DST  
(Title)

of The Florida Dive Show Inc  
(Name of Corporation)

PD5000039228, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

Paula O. Johnson  
(Signature of resigning officer/director)

FILED  
05 AUG -1 PM 3:27  
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