

**P05000055082**

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(Requestor's Name)

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(Address)

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(Address)

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(City/State/Zip/Phone #)

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\_\_\_\_\_  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*off*

*Ref*

*[Signature]*

*12-4-2007*

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The Osborne Agency Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

FRANK ST. CLAIR  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

4202 E. 97<sup>th</sup> Ave.  
(Address)

Tampa Fla 33617  
(City/State and Zip Code)

For further information concerning this matter, please call:

FRANK ST. CLAIR at (813) 318-1767  
(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**

I, FRANK STICLAIR, hereby resign as Vice Pres.  
(Title)

of The Osborne Agency Inc.  
(Name of Corporation)

08588005882, a corporation organized under the laws of the State of  
(Document Number, if known)  
Florida.

Frank Stclair  
(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

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