## 0500006752

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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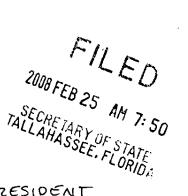
officer Presignation
TB 2-26-08

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: ABCO DEVELO	OPMENT OF S.W. FLOR (Name of Corporation)	LIDA, INC.
DOCUMENT NUMBER:	205000067528	
The enclosed Officer/Director Re	signation for a Corporation and	fee are submitted for filing.
Please return all correspondence	concerning this matter to the foll	owing:
CRAIG SCOTT (Name of Po	erson)	
(Name of Firm/	Company)	
3527 GRAND CYP (Address	RESS DRIVE	
NAPLES FLORIDA (City/State and 2	4 34119 Zip Code)	
For further information concerning	g this matter, please call:	
CRAIG SCOTT (Name of Person)	at ( <u>239</u> ) <u>S</u> (Area Code & Da	794-9488 aytime Telephone Number)
Enclosed is a check for \$35.00 ma	ade payable to the Florida Depar	tment 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	PLEASE NOTE: THIS RESIGNATION WAS
•		TEMPHOLON AND EFFECTIVE

JANUARY 1st, 2008.

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION



I, _	CRAIG SCOTT	, hereby resign as VICE PRESIDEAT
		(Title)
of_	ABCO DEVELOPMENT	OF S.W. FLORIDA, INC.
	P05000067528 (Document Number, if known)	, a corporation organized under the laws of the State of
	FLORIDA	
		CA-
		(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