P05000110712

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	"With the
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL MAIL
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(Do	cument Number)	***
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUB.	JECT: Davenport/Barrett Insurance Agency, Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: P05000116712
The e	enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Tim	othy Davenport
	(Name of Person)
Dav	renport Insurance Services, Inc.
	(Name of Firm/Company)
225	4 Aloma Avenue
	(Address)
Win	ter Park, FL 32792
	(City/State and Zip Code)
For fi	urther information concerning this matter, please call:
Timo	othy Davenport at (407) 629-2011 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclo	osed is a check for \$35.00 made payable to the Florida Department of State.
Amer Divis Clifto 2661	Mailing Address: Amendment Section ion of Corporations by Building Executive Center Circle Corporations For Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

TO:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Debbie Barrett	, hereby resign as Vice-President (Title)
of Davenport/Barrett Insurance	e Agency, Inc.
P05000116712 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	
	(Signature of resigning officer/director) TALLAHASSET STATE OF SIGNATURE OF SIGNAT

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