05000138187





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01/03/12--01018--015 **35.00

off. Res. Brown 1-6-12

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Tropic Value Appraisals, Inc
(Name of Corporation)
DOCUMENT NUMBER: P05000138187
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Samuel D. Owens, III
(Name of Person)
Tropic Value Appraisals, Inc
(Name of Firm/Company)
PO Box 2597
(Address)
Sanford, FL 32772
(City/State and Zip Code)
For further information concerning this matter, please call:
Samuel D Owens, III at (321) 282-9705
Samuel D Owens, III (Name of Person) at (321) 282-9705 (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

TALECRETARY OF STATE 45

William E. Custer, IV	, hereby resign as_	President
	nereby resign as_	(Title)
ofTropic Value Appraisals_Inc,		
(Nam	e of Corporation)	
P05000138187 (Document Number, if known)	a corporation organized un	der the laws of the State of
Florida		
Will	E Cust Int	
<i>u</i> / <i>x</i> t	(Signature of resigning officer/direc	tor)

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