

PA5000153683

(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



200101708332

05/09/07--01022--030 **70.00

07 MAY -9 PM 4:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

G. G. Resign
G. G. Resign MAY 15 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ATLANTIC RESTORATION COUNCIL, INC.
(Name of Corporation)

DOCUMENT NUMBER: P05000153683

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

Please return all correspondence concerning this matter to the following:

MAX STORY

(Name of Person)

COLLINS & STORY, P.A.

(Name of Firm/Company)

233 E. BAY STREET, SUITE 920

(Address)

JACKSONVILLE, FL 32202

(City/State and Zip Code)

For further information concerning this matter, please call:

MAX STORY at (904) 355-0805
(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

**RESIGNATION OF LYNNE A. PRICE AS SECRETARY
OF ATLANTIC RESTORATION COUNCIL, INC.**

I, LYNNE A. PRICE, hereby resign as Secretary of Atlantic Restoration Council, Inc.,
effective immediately.

3-19-07
Date


LYNNE A. PRICE

APPROVED
AND
FILED
07 MAY -9 PM 4: 21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA