

P05676

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

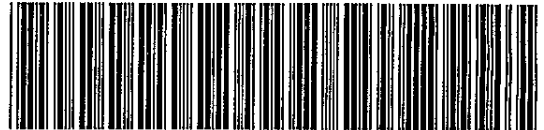
(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only



800050381308

*Resignation*  
*by*  
*Officer*

04/15/05--01015--016 \*\*35.00

FILED  
05 APR 15 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*ADR*  
*4/21/05*

## TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: CHAMBERS TRUST INC  
(Name of Corporation)

DOCUMENT NUMBER: PO 5676

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

Please return all correspondence concerning this matter to the following:

BOB BELCHT  
(Name of Person)

CHAMBERS TRUST INC  
(Name of Firm/Company)

3105 OLEANDER AVENUE  
(Address)

KORT + PIERCE, FL 34982  
(City/State and Zip Code)

For further information concerning this matter, please call:

BOB BELCHT at ( 972 ) 465 2012  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
05 APR 15 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
VICE President/D/AS  
(Title)

I, ARVIN H. RIEGEL, hereby resign as VICE President/D/AS  
(Title)

of CHAMBERS TRUSS, INC  
(Name of Corporation)

POS676, a corporation organized under the laws of the State of  
(Document Number, if known)

Delaware

  
(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