10600026738

Office Use Only



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resignation Boggieen

01/04/07--01029--003 **35.00

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ON JAN -4 PH 12: 08

SECRETARY OF STATE ALLAHASSEE.FLORIDA

ATTORNEYS' 1		
Requestor's Name		
1965 Capital Circle N	NE Suite A	
Address		
T-II-1 51 000		
Tallahassee, FI 323		
City/St/Zip	Phone #	
CODDODATION MAI	ME(S) & DOCUMENT NUMBER(S) (if known)	
CORPORATION NA	ME(S) & DOCUMENT NUMBER(S), (if known):	
1- KANZI FR DEVE	* OPMENT INC	
1- KANZLER DEVE	LUMIVIENT, INC.	
2-		
3-		
4-		
-		
X Walk-in	Pick-up time ASAP Certified	
		
Mail-out	Will wait Photocopy Certificate of Status	
NEW FILINGS	AMENDMENTS	
Profit		
, , , , , , , , ,	Amendment	
Non-Profit	Amendment XXX Resignation of R.A., Officer/Director	
	Amendment XXX Resignation of R.A., Officer/Director Change of Registered Agent	
Non-Profit	XXX Resignation of R.A., Officer/Director	
Non-Profit Limited Liability	XXX Resignation of R.A., Officer/Director Change of Registered Agent	
Non-Profit Limited Liability Domestication Other	XXX Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
Non-Profit Limited Liability Domestication Other	XXX Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal	
Non-Profit Limited Liability Domestication Other OTHER FILINGS Annual Report	XXX Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign	
Non-Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	XXX Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION	
Non-Profit Limited Liability Domestication Other OTHER FILINGS Annual Report	XXX Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign	
Non-Profit Limited Liability Domestication Other OTHER FILINGS Annual Report Fictitious Name	XXX Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger REGISTRATION/QUALIFICATION Foreign Limited Partnership	

Examiner's Initials

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	KANZLER	DEVELOPMENT, INC.				
	(Name of Corporation)					
DOCUMENT N	IUMBER:	P06000026738				
The enclosed Of	ficer/Director	Resignation for a Corporation and fee are submitted for filing				
Please return all	corresponden	ce concerning this matter to the following:				
James J.	Kanzler	of Person)				
	(Name o	in reison)				
Kanzler	Developme					
	(Name of Fi	rm/Company)				
21900 St	ate Route	= 82				
	(Add	dress)				
Fort Mye	ers, FL 3	33913				
	(City/State a	and Zip Code)				
For further infor	mation concer	rning this matter, please call:				
Timothy(G. Hains Name of Perso	at (941) 434-4924 n) (Area Code & Daytime Telephone Number)				
Enclosed is a che	eck for \$35.00	made payable to the Florida Department of State.				
Street Address: Amendment Sec Division of Corp Clifton Building 2661 Executive O Tallahassee, FL	orations Center Circle	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314				

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

FILED FLORIBETOR SEE, FLORIBECTOR LA PARISEE, FLORIBECTOR LA PARISEE TO PROPERTY OF STATE OF

I.	MILTON S. KENT	, hereby resign as	President/Director	
′			(Title)	
of	KANZLER DEVELOPMEN	T, INC.	*	
	(Name	of Corporation)		
	D0000000000000000000000000000000000000			
P06000026738		, a corporation organized under the laws of the State of		
	(Document Number, if known)			
	FLORIDA			

(Signature of resigning officer/director)
Milton S. Kent

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