DO(2000)82566

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(Cit	y/State/Zip/Phone	e #)
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TRANSMITTAL LETTER

SUBJECT: HARELSON'S NURSERY & LANDSCAPE, INC. (Name of Corporation)
DOCUMENT NUMBER: P06000082566
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
HOMER HARRELSON (Name of Person)
HARRELSON'S NURSERY & LANDSCAPE, INC.
(Name of Firm/Company)
4231 KEENE ROAD
(Address)
PLANT CITY, FLORIDA 33565
(City/State and Zip Code)
For further information concerning this matter, please call:
HOMER HARRELSON at (813) 927-4502 (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

TO: Amendment Section Division of Corporations

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

south to be

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, BRENDA C. HARRE	ELSON, hereby resign as VP
O	JRSERY & LANDSCAPE, INC.
P06000082566 (Document Number, if known) FLORIDA	, a corporation organized under the laws of the State of
	SECR. FI
Bruly	Signature of resigning officer/director) HASSEFUL TO THE TOTAL TO

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