

P07000002791

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

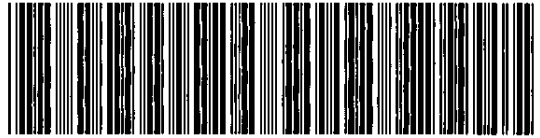
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 OCT -8 AM 9:34

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Legacy Family Chronicles, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07006002291

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

Please return all correspondence concerning this matter to the following:

Steve Zaharopoulos
(Name of Person)

Legacy Family Chronicles, Inc.
(Name of Firm/Company)

35246 US Highway 19 N. #295
(Address)

Palm Harbor, FL 34684
(City/State and Zip Code)

For further information concerning this matter, please call:

Mark Hayes at (813) 240-1285
(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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Cynthia J. Liles, hereby resign as Secretary, Treasurer/Director
(Title)
of Legacy Family Chronicles, Inc.
(Name of Corporation)
P07000002791, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Cynthia J. Liles
(Signature of resigning officer/director)

FILING FEE \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6127
Tallahassee, Florida 32314

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