## P01000091725

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Business Entity Name)		
(Document Number)		
Cartificat Capies Cartificates of Status		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
Office Use Only		
CD Res		
10, 9.26.07		

ŝ

.



09/20/07--01022--001 \*\*35.00

DIVISION FEILED STATE

## **COVER LETTER**

۰.

4

**TO:** Amendment Section Division of Corporations

•

.

SUBJECT: Colonial Realty & property Management Inc.		
(Name of Corporation)	• • •	
DOCUMENT NUMBER: <u>P0700091725</u>	r-	
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Sagrario Ramos		
(Name of Person)		• •
Colonial Realty & Property Management Inc.		
(Name of Firm/Company)		۰,
11725 Collier Blvd. Suite E.		
(Address)	× <b>E</b> + *	ي دي يسم م
Naples florida 34116		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Joe mercurio at (239) 692-8260   (Name of Person) (Area Code & Daytime Telephone Number)		<b>.</b>
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. Sagrario Ramos	hereby resign as Vice Pres./Director
	(Title)
of Colonial Realty & Property Mar	
(Name c	of Corporation)
PO 7000091725 (Document Number, if known)	_ a corporation organized under the laws of the State of
Florida	at the state of th
	•

wo

(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