

P070000098936

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Resignation
Officer

04/17/09--01007--004 **35.00

FILED
2009 APR 17 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADR
4/20/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MCCORMICK COLLISION CENTER INC WEST
(Name of Corporation)

DOCUMENT NUMBER: P07000098936

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

Please return all correspondence concerning this matter to the following:

DAN DEXTER

(Name of Person)

(Name of Firm/Company)

1198 MAYPORT RD

(Address)

ATLANTIC BEACH FL 32233

(City/State and Zip Code)

For further information concerning this matter, please call:

DAN DEXTER

(Name of Person)

at (904) 2494899

(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**

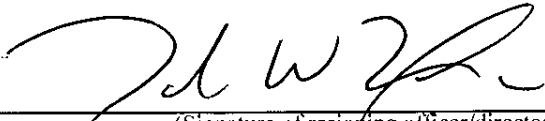
FILED
2009 APR 17 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, DANIEL W DEXTER JR, hereby resign as VICE PRESIDENT
(Title)

of MCCORMICK COLLISION CENTER INC. WEST
(Name of Corporation)

P07000098936, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(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