

P07000105511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

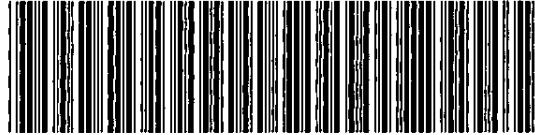
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200119557292

03/07/08--01009--013 \*\*35.00

FILED

08 MAR -7 AM 10:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

0025

3-10-08

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PIZZA PAN FAMILY RESTAURANT, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** PD7000105511

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

Please return all correspondence concerning this matter to the following:

REGINA KINGSLAND  
(Name of Person)  
DBA STAVROS PIZZA DELAND  
PIZZA PAN FAMILY RESTAURANT  
(Name of Firm/Company)

803 W. NEW YORK AVE  
(Address)

DELAND, FL 32720  
(City/State and Zip Code)

For further information concerning this matter, please call:

REGINA KINGSLAND at (386) 738-7600  
(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, ALEXIA K FALKNER, hereby resign as SECRETARY  
(Title)

of PIZZA PAN FAMILY RESTAURANT INC  
(Name of Corporation)

PO7000105511, a corporation organized under the laws of the State of  
(Document Number, if known)

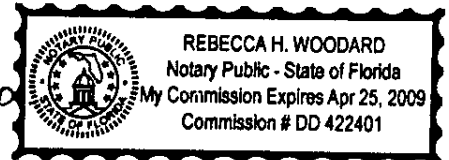
FLORIDA

Alexia K. Falkner  
(Signature of resigning officer/director)

**FILED**  
**08 MAR -7 AM 10:33**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

State of Florida  
County of Volusia

On this the 4th day of March, personally appeared  
Alexia K Falkner, Producing FL Drivers License AS ID  
FILING FEE IS \$35.00



Notary: Rebecca H Woodard  
Rebecca H Woodard

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

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314