

P08000071672

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

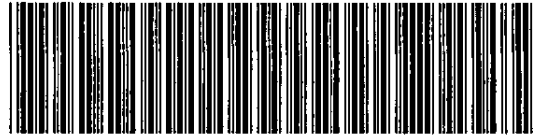
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC 20 2012  
T. LEMIEUX

610

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** INTERNATIONAL PORT CORP  
(Name of Corporation)

**DOCUMENT NUMBER:** P08000071672

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

Please return all correspondence concerning this matter to the following:

H. PAUL CHEEKS

(Name of Person)

INTERNATIONAL PORT CORP.

(Name of Firm/Company)

561 HUNT ROAD

(Address)

TARPON SPRINGS, FL 34688

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVID K. KUSCHEL

(Name of Person)

at 561 747-0852

(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

**Street Address:**

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

RX Date/Time

09/20/2031 03:20 5617450740

12/17/2012

13:28

5617450740

KUSCHEL

P.002

#3136 P.002/002

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

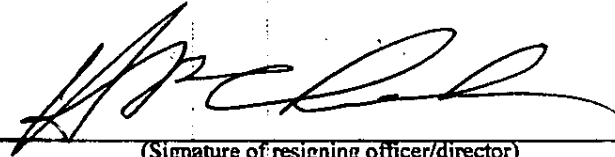
I, H. PAUL CHEEKS, hereby resign as DIRECTOR/PRESIDENT  
(Title)

of INTERNATIONAL PORT CORP.  
(Name of Corporation)

P08000071672

(Document Number, if known)

a corporation organized under the laws of the State of  
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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 DEC 20 PM 1:23

**FILED**