

P09000011000

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

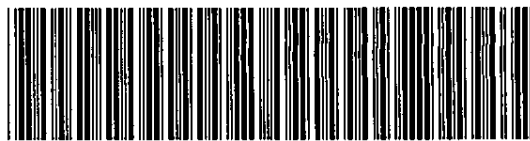
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/06/14--01010--026 **35.00

Resignation
of Officer

FILED
2014 JAN -6 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
1/14/14

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Harvest Builders, Inc.
(Name of Corporation)

DOCUMENT NUMBER: PD9000011000

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

Please return all correspondence concerning this matter to the following:

Craig Hopper
(Name of Person)

(Name of Firm/Company)

PO Box 638
(Address)

Lake Placid, FL 33862
(City/State and Zip Code)

For further information concerning this matter, please call:

Craig Hopper at (863) 840-1288
(Name of Person) (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
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED

2014 JAN -6 PM 2:11

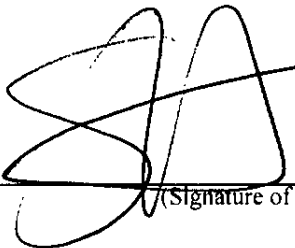
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
(Title)

I, Craig Hopper, hereby resign as Vice President

of Harvest Builders, Inc.
(Name of Corporation)

P09000011000, 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