

P09000032134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

O/D Resign.

~~RECORDED~~ NOV 20 2009

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** OCEAN DRIVE RECOVERY RESORTS - MANSION, INC  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000032134  
\_\_\_\_\_

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

<sup>R</sup>  
FRANK GUAGLIARDO  
\_\_\_\_\_

(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

1990 NE 163 ST SUITE 104  
\_\_\_\_\_

(Address)

NORTH MIAMI BEACH FL 33162 US  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

<sup>R</sup>  
FRANK GUAGLIARDO  
\_\_\_\_\_

(Name of Person)

at ( 305 ) 773-6594

(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

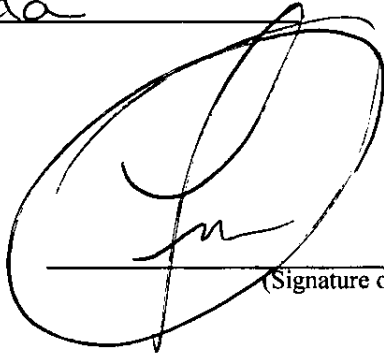
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Frank Guarigliardo, hereby resign as VP Director  
(Title)

of Ocean Drive Recovery Resorts - Mansion, Inc.  
(Name of Corporation)

PO9000032134, 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**

**FILED**  
**09 NOV 16 AM 8:24**  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

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