

PO90000039179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

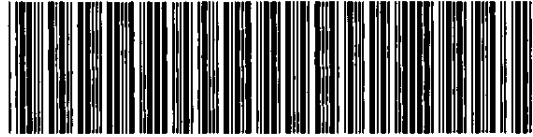
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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OD/Res  
@ 8/17/12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** G WILSON BUILDERS INC  
\_\_\_\_\_  
(Name of Corporation)  
P09000039179  
**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

**GENEVIEVE WILSON**  
\_\_\_\_\_  
(Name of Person)

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

**4797 OAHU DRIVE**  
\_\_\_\_\_  
(Address)

**NAPLES, FL. 34112**  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

**GENEVIEVE WILSON** at ( **239** ) **777-8768**  
\_\_\_\_\_  
(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

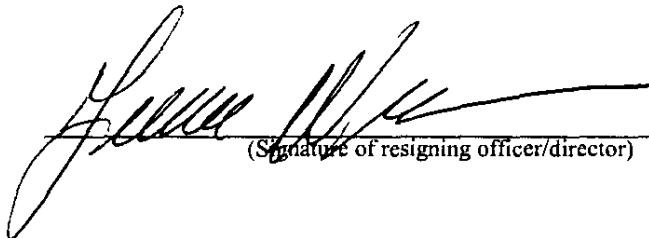
**Mailing Address:**  
Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

GENEVIEVE WILSON PRESIDENT  
I, \_\_\_\_\_, hereby resign as \_\_\_\_\_  
(Title)

G WILSON BUIDLERS INC.  
of \_\_\_\_\_  
(Name of Corporation)

P09000039179  
\_\_\_\_\_, 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

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SECRETARY OF CORP  
DIVISION OF CORPORATIONS