

P 94000064831

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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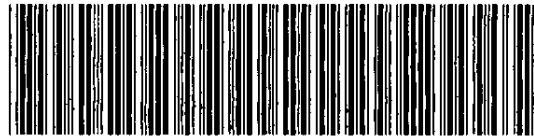
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Handwritten signature*

G. Goulette JUN 13 2008

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Swaine, Harris & Sheehan, P.A.  
(Name of Corporation)

**DOCUMENT NUMBER:** P94000064831

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

J. Michael Swaine

(Name of Person)

Swaine, Harris & Sheehan, P.A.

(Name of Firm/Company)

425 South Commerce Avenue

(Address)

Sebring, FL 33870-3702

(City/State and Zip Code)

For further information concerning this matter, please call:

J. Michael Swaine

(Name of Person)

at ( 863 ) 385-1549

(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, J. Timothy Sheehan, hereby resign as Secretary-Treasurer  
(Title)

of Swaine, Harris & Sheehan, P.A.  
(Name of Corporation)

P94000064831, 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

**FILED**  
08 JUN 12 AM 9:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA