

P96000014872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

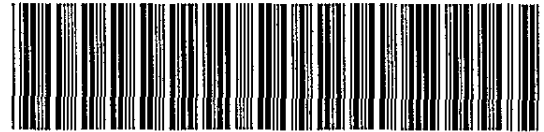
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600048302086

03/24/05--01022--001 **35.00

FILED
05 MAR 24 PM 12:01
SECRETARY OF STATE
TALLAHASSEE FLORIDA

MAR 31 2005

10

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: John Carry, P.A.

(Name of Corporation)

DOCUMENT NUMBER: P96000014872

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

Please return all correspondence concerning this matter to the following:

John W. Carry

(Name of Person)

John Carry, P.A.

(Name of Firm/Company)

2255 Glades Road, Suite 324A

(Address)

Boca Raton, Florida 33431

(City/State and Zip Code)

For further information concerning this matter, please call:

John W. Carry

(Name of Person)

at (954) 418-8181

(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

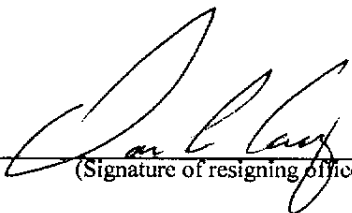
Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Dawn C. Carry, hereby resign as Secretary/Treasurer
(Title)

of John Carry, P.A.
(Name of Corporation)

P96000014872, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILED
05 MAR 24 PM 12: 01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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