

P96000075254

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

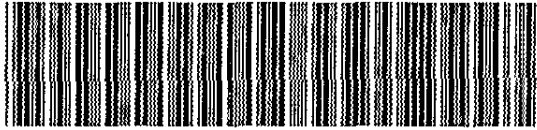
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TALLAHASSEE, FLORIDA

TO: Amendment Section
Division of Corporations

SUBJECT: WILSON MARKETING, INC.
(Name of Corporation)

DOCUMENT NUMBER: P 960000 75254

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

Please return all correspondence concerning this matter to the following:

BRUCE H. WILSON
(Name of Person)

WILSON MARKETING, INC.
(Name of Firm/Company)

815 MILLSTREAM LANE
(Address)

ORMOND BEACH FL. 32174
(City/State and Zip Code)

For further information concerning this matter, please call:

BRUCE H. WILSON at (386) 586-2543
(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
409 E. Gaines Street
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, BRUCE WILSON, hereby resign as VICE PRESIDENT
(Title)

of WILSON MARKETING, INC.
(Name of Corporation)

P96000075254, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Bruce H. Wilson
(Signature of resigning officer/director)

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04 FEB 19 PM 12:10
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