## P960000 78283

-			
(Reque	estor's Name)		
(Addre	ess)		
(Addre	ss)		
(City/State/Zip/Phone #)			
PICK-UP	WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	Certificate	s of Status	
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SECRETARY OF SHATE
TALLAHASSEE FINE

C. Coulliste MAR 0 3 2004

## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CORPORATE MANAGEMENT GROUP, INCORPORATED (Name of Corporation)
DOCUMENT NUMBER: P9600078283
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Christopher Gilcher
(Name of Firm/Company)
16512 Foothill Dr. (Address)
Tampa, FL 33624-1049 (City/State and Zip Code)
For further information concerning this matter, please call:
Christopher Gilcher at ((Area Code & Daytime Telephone Number)
,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned, Christopher Gilcher (Name of Registered Agent)	
hereby resigns as Registered Agent for Corporate Management Green (Name of Corporation)	rup, INCORPORATED
P96000078283 (Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last know	n address.
The agency is terminated and the office discontinued on the 31st day after the date of this statement is filed.	n which
Chirtop Gila	
(Signature of Resigning Agent)  If signing on behalf of an entity:	FILE  04 FEB 26  SECRETARY TALLAHASSE
(Typed or Printed Name)	PM 2: 55 Y OF STATE

## Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

(Capacity)