

P96000081049

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

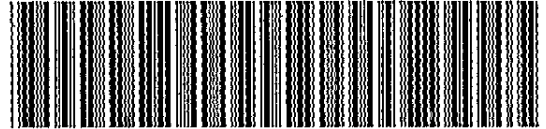
(Business Entity Name)

(Document Number)

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COUNTY OF STATE
ALLAHASSEE, FLORIDA

Ps 5/26/04
to res.

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CH GOLF I Ventures INC
(Name of Corporation)

DOCUMENT NUMBER: P96000081049

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

Please return all correspondence concerning this matter to the following:

IRA COHEN
(Name of Person)

CH GOLF I Ventures INC
(Name of Firm/Company)

7590 W. ATLANTIC BLVD
(Address)

MARGATE FL 33063
(City/State and Zip Code)

For further information concerning this matter, please call:

STEPHEN HOCHBERG at (617) 633-6890
(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**

FILED

04 MAY 21 PM 1:1


SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, IRA COHEN, hereby resign as PRESIDENT
(Title)

of CH GOLF I Ventures INC.
(Name of Corporation)

P96000081049, 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