

P97000000826

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

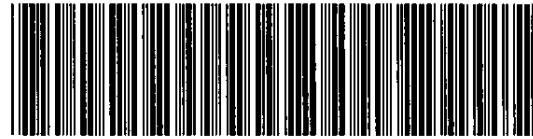
(Business Entity Name)

(Document Number)

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*Resignation  
to officer*

08/24/12--01004--004 \*\*35.00

FILED  
2012 AUG 24 PM 1:58  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*DPF  
8/27/12*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Groves Swimming Pool Service, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P97000000826

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

Please return all correspondence concerning this matter to the following:

R. Bryan Groves  
(Name of Person)

Groves Swimming Pool Service, Inc.  
(Name of Firm/Company)

1161 Twin Oak Ct.  
(Address)

Marco Island, FL 34145  
(City/State and Zip Code)

For further information concerning this matter, please call:

R. Bryan Groves at ( 239 ) 642-9372  
(Name of Person) (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**

**FILED**

2012 AUG 24 PM 1:58

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

I, James Groves, hereby resign as Vice President  
(Title)

of Groves Swimming Pool Service, Inc.  
(Name of Corporation)

P97000000826, 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