P97000050085

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Dusiness Littly Walle)					
(Document Number)					
Certified Copies Certificates of Status					
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SECRETARY OF STATE
DIVISION OF CORPORATION

Old Resign.
11/14/05
DC

COVER LETTER

	vision of Corporations
SUBJECT	r: Chapman Demolition, Inc. (Name of Corporation)
DOCUME	ENT NUMBER:
The enclos	sed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please retu	urn all correspondence concerning this matter to the following:
Ed Ch	napman
	(Name of Person)
	(Name of Firm/Company)
	(Name of Finiscompany)
4804	Amsbury Court (Address)
	(Address)
Orlan	ndo, Florida 32817 (City/State and Zip Code)
For further	r information concerning this matter, please call:
Ed Ch	at (407) 679-1771 (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is	is a check for \$35.00 made payable to the Florida Department of State.
2661 Exect	dress:

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I.	Edwin L. Chapman Jr.	, hereby resign as	President
7 —			(Title)
of_		##-X	,
	(Name of Corpora	tion)	
_	(Document Number, if known)	oration organized unde	er the laws of the State of
	,		
	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 05 NOV 10 PM 3: 53

SECRETARY OF STATE
DIVISION OF CORPORATION