P980008263

(Re	questor's Name)	
(Ad	dress)	
(Ād	dress)	
(Cit	y/State/Zip/Phone	; #)
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CROSS ROADS UNDERWRITERS, TOURISTERS, TOURIST NUMBER: P98000083631
DOCUMENT NUMBER: T 7600082621
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: PATRICIA J. SHAPLEY (Name of Person)
CROSS ROADS UNDERWRIXERS INC. (Name of Firm Company)
41253 Xenon Way (Address)
ZEPhyRhills FL 33540 (City/State and Zip Code)
For further information concerning this matter, please call:
PATRICIA SHAPLEY at (813) 713-1808 (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

PATRICIA J. SH	HAPLey, hereby resign as PRESID	ENT Title)
of CROSS ROADS	Underweiters . INC	<u>.</u> ,
P98000082631 (Document Number, if known)	, a corporation organized under the laws of t	he State of
FLORIDA	<u>·</u>	OH APR
		THE PERSON
- Patrice	(Signature of (esigning officer/director)	FSIATE

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