

P98000107288

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

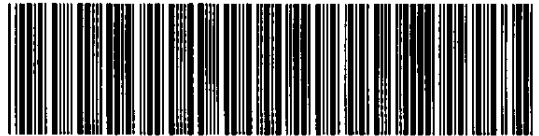
(Business Entity Name)

(Document Number)

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O/D Resign

6/19/09  
DC

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SECRETARY OF STATE  
HALLAMSBURG

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PRJ OF TAMPA INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P98000107288

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

Please return all correspondence concerning this matter to the following:

PAMELA ROSS-JOHNSON  
(Name of Person)

PRJ OF TAMPA INC  
(Name of Firm/Company)

100 BLUFFVIEW DR. #105B  
(Address)

BELLAIR BLUFFS, FLORIDA 33770  
(City/State and Zip Code)

For further information concerning this matter, please call:

PAMELA OR RONALD ROSS-JOHNSON 727) 588 0659  
(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**

I, IAN WESLEY ROSS-JOHNSON, hereby resign as DIRECTOR  
(Title)

of PRJ OF TAMPA, INC.  
(Name of Corporation)

P98000107288, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

*Ian Ross-Johnson*  
(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

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