## P99000029751

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

RA/Bes.



300024324633

11/05/03--01011--003 \*\*35.00

FILLU
3 NOV -5 PM 3: 55
CHETARY OF STATE

## TRANSMITTAL LETTER

SUBJECT: East Coast Millwork, Inc
DOCUMENT NUMBER: P990000 29751
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
S. HOWARD DRUER, ESG (Name of Person)
2825 University Drive #350 FFG B
Corne Springs, Fl. 33065 ST ST (City/State and/Zip Code)
For further information concerning this matter, please call:
S. Howard Osniki at (951) - 152-1774  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

TO: Amendment Section

Division of Corporations

Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, S. Howard DRNER EST
(Name of Registered Agent)
hereby resigns as Registered Agent for <u>East Coast Millwork</u> , Two
(Name of Corporation)
V99800029751
The state of the s
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
A copy of this resignation was maned to the above fisted corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
(Signature of Resigning Agent)
(o.g.m.ng.v.g.m)
If signing on behalf of an entity:
$C \cup C$
S. HOWARD DRUER
(Typed or Printed Name)
(Types of Timeer value)
(Capacity)

## Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

O3 NOV -5 PM 3: 55