P9900093702

Florida Department of State Divisions of Corporations P.O. Box 6327 Tallahassee, FL 32314

Re: Resignation of Registered Agent

Please find enclosed form CR2E046.

I terminate CAD Professionals from the use of my address:

P.O. Box 321147 Cocoa Beach, FL 32932 100003261861--2 -05/22/00--01111--007 ******35.00 ******35.00

Or

Suite 17 3245 N. Courtenay Pkwy Merritt Island, FL 32953

I certify that a copy of form CR2E046 has been sent to the last known address of the company:

CAD Professionals President 815 Seina Vista Madison Al 35758

-11/

Sincerely

Thomas F. Wilson

RA resig.

V. SHEPARD JUN 5 200



RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Thomas F. Wilson (Name of registered agent)
hereby resigns as Registered Agent for CAD Professionals, TVC, (Name of corporation)
A copy of this resignation was mailed to the above listed 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)
If signing on behalf of an entity:
(Typed or Printed Name)
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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