

P99000095292

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** DONOGHUE WOOD & ASSOCIATES, INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P99000095292

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

Please return all correspondence concerning this matter to the following:

TODD WOOD

(Name of Person)

P.O. BOX 171

(Name of Firm/Company)

PALM HARBOR, FL 34683

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

TODD WOOD at ( 727 ) 641-7279  
(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

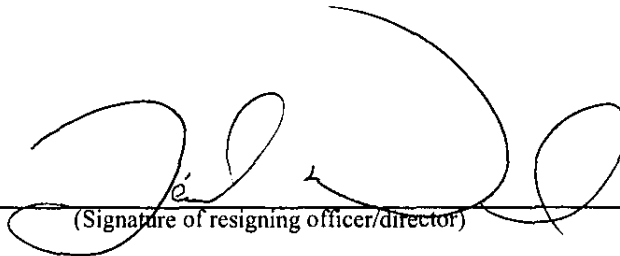
**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, TODD WOOD, hereby resign as V.P.  
(Title)

of DONOGHUE WOOD & ASSOCIATES, INC. (effective February 22, 2008)  
(Name of Corporation)

P99000095292, a corporation organized under the laws of the State of  
(Document Number, if known)

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

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**TALLAHASSEE FLORIDA**