

ORIGINAL

RECEIVED-FPSC

05 NOV 16 AM 9:59

COMMISSION CLERK

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

050565

Birchwood Properties Corp.  
5524 Cypress Street, Suite B  
Tampa FL 33607-1708

2. Article Number

(Transfer from service label)

7004 1160 0004 5750 6363

PS Form 3811, March 2001

Domestic Return Receipt

102595-01-M-1424

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

11-9-05

C. Signature

X 

Agent

Addressee

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:

No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

CMP \_\_\_\_\_

COM \_\_\_\_\_

CTR \_\_\_\_\_

ECR \_\_\_\_\_

GCL \_\_\_\_\_

OPC \_\_\_\_\_

RCA \_\_\_\_\_

SCR \_\_\_\_\_

SGA \_\_\_\_\_

SEC   1  

OTH \_\_\_\_\_

PAA order PSC-05-1119-PAA-TC

DOCUMENT NUMBER-DATE

10999 NOV 16 05

FPSC-COMMISSION CLERK