

P 00000032077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S/D
Resign.

5/4/04

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WEST REHABILITATION CENTER, INC.
(Name of Corporation)

DOCUMENT NUMBER: P00000032077

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

Please return all correspondence concerning this matter to the following:

JEFFREY SCOTT SENTER

(Name of Person)

WEST REHABILITATION, INC.

(Name of Firm/Company)

857 SAND CREEK CIRCLE

(Address)

WESTON, FLORIDA 33327

(City/State and Zip Code)

For further information concerning this matter, please call:

JEFF SENTER

(Name of Person)

at (954) 520-1952

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

Street Address:

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

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, JEFFREY SENTER, DC, hereby resign as PRESIDENT/TREASURER
(Title)

of WEST REHABILITATION CENTER, INC.,
(Name of Corporation)

P00000032077, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

Jeffrey Senter, DC President / Treasurer
(Signature of resigning officer/director)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

04 APR 27 PM 3:43

FILED

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