

PA3000087334

Requester's Name

City

1901 Morrill Street
Sarasota, Florida 34236

300007343163--4
-08/26/02--01074--001
*****87.50 *****87.50

Office Use Only

CORPORATION IDENT NUMBER(S), (if known):

- 1. _____
(Corporation Name) (Document #)
- 2. _____
(Corporation Name) (Document #)
- 3. _____
(Corporation Name) (Document #)
- 4. _____
(Corporation Name) (Document #)

02 AUG 26 PM 12:25
SECRETARY OF STATE
ALLAHASSEY, FLORIDA

FILED

- Walk in Pick up time Certified Copy
- Mail out Will wait Photocopy Certificate of Status

NEW FILINGS

- Profit
- Not for Profit
- Limited Liability
- Domestication
- Other

AMENDMENTS

- Amendment
- Resignation of R.A., Officer/Director
- Change of Registered Agent
- Dissolution/Withdrawal
- Merger

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

*PA3000087334
RTRW 8-26-02
JF*

Examiner's Initials

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, STEVEN R. BRADLEY


(Name of registered agent)

hereby resigns as Registered Agent for LAKELAND HEALTH CARE CENTER, INC.

(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:

STEVEN R. BRADLEY

(Typed or Printed Name)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
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FILED

(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