597358

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officio Risign ain Minphy 12/31/07

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: KEY WEST UROLOGY ASSOCIATES, P.A.	
(Name of Corporation)	_
DOCUMENT NUMBER: 597358	_
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for fi	iling
Please return all correspondence concerning this matter to the following:	
David Kalies	
(Name of Person)	
Key West Urology Associates, P. A.	
(Name of Firm/Company)	
111 12th Street	
(Address)	
Key West, Florida 33040	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Patricia A. Eables, Esq. at (305) 294-4585 (Name of Person) (Area Code & Daytime Telephone Numb	
(Name of Person) (Area Code & Daytime Telephone Numb	er)
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, DAVID KALIES	_, hereby resign as_	Director, Vice-President & Treasurer		
		(Title)	2
of_ Key West Urology, P.A.				_,
(Name of Corporati	on)			
597358 , a corpo	ration organized ur	der the laws of th	ne State of	
Florida , effective as of January	y 1, 2008.			
	resigning officer/direct	tion)	07 DEC 26 PM 3: SCURETARY OF ST TALLAHASSEE, FLO	

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