

768158

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

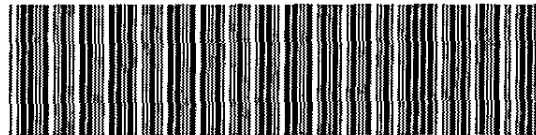
(Business Entity Name)

(Document Number)

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07 JUL 20 AM 9:05
SECRETARY OF STATE
TALLAHASSEE, FL 32304

077 Kasegr

C. Coulllette JUL 26 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PARK MEDICAL CONDO OWNERS ASSN INC.
(Name of Corporation)

DOCUMENT NUMBER: 768158

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

Please return all correspondence concerning this matter to the following:

ANGELA DICRESCENZO
(Name of Person)

QTA ASSOCIATES INC.
(Name of Firm/Company)

665 SE 10TH STREET #201
(Address)

DEERFIELD BEACH, FL 33441
(City/State and Zip Code)

For further information concerning this matter, please call:

ANGELA DICRESCENZO 934, 511-4090
(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, FREDERICK E. CHALKER, hereby resign as PRESIDENT /
TREASURER (Title)
of Park Medical Plaza Condominium OWNERS ASSOCIATION,
(Name of Corporation) INC.
768158, a corporation organized under the laws of the State of
(Document Number, if known)
FLORIDA.

(X) Frederick Chalker
(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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