

F03000000131

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

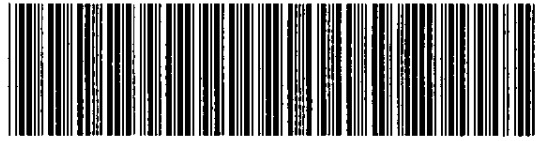
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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000148515960

Resignation
of RA

04/10/09--01036--002 **175.00

FILED
2009 APR 10 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJR
4/15/09



111 Eighth Avenue
New York, NY 10011

212 894 8940 tel
212 590 9180 fax
www.ctlegalsolutions.com

April 1, 2009

RE: BALANCED TRACK MANAGEMENT CORP. (NY. DOM.)
GROUP INSURANCE ADMINISTRATORS, INC. (PA. DOM.)
K.S. TRADING & SERVICES, INC. (FL. DOM.)
LEGACY ST INC. (FL. DOM.)
MD MEDICARE CHOICE, INC. (FL. DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for each of the above corporations. Also enclosed is 1 checks in the amount of \$175.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri
Senior Supervisor &
Assistant Secretary

TA/hm
Enclosure

April 1, 2009

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Assistant Secretary

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA


**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, C T CORPORATION SYSTEM
(Name of Registered Agent)
hereby resigns as Registered Agent for BALANCED TRACK MANAGEMENT CORP.
(NY DOM.) (Name of Corporation)

F03000000131
(Document Number, if known)

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:

C T CORPORATION SYSTEM - THERESA ALFIERI
(Typed or Printed Name)

ASSISTANT SECRETARY
(Capacity)

Fee for filing this document:
\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314