F93000002513

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DIVISION OF CORPORATIONS

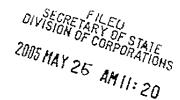
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TRANSMITTAL LETTER

SUBJECT: LIBERTY ASSISTED LIVING CENTERS OF FLORIDA INC. (Name of Corporation)
DOCUMENT NUMBER: F 93000002513
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
ALAN D. PARRISH (Name of Person)
LIBERTY ASSISTED LIVING CENTERS OF FLORIDA, INC.
3073 HORSESHOE DR. SU., STE. (Address)
NAPLES, FL 34104 (City/State and Zip Code)
For further information concerning this matter, please call:
CAmeron LARSON - at (239) 262-8006 Assistant (Name of Person) D. HARRISH (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

TO: Amendment Section Division of Corporations



OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	ALAW D. PARRISH hereby resign as COP (Title)
of	LIBERTY ASSISTED LIVING CENTERS OF FLURIDATING.
F	9300002513, a corporation organized under the laws of the State of (Document Number, if known)
	GEORGIA.

(Signature of resigning officer/director)

D. PARRISH

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