F99000002269

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NECKLIJASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CENTERS FOR LONG TERM CARE OF FLORIDA, INC.

(Name of Corporation)

DOCUMENT NUMBER: F99000002269

The enclosed withdrawal application and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GARY R. TREBERT

(Name of Person)

CENTERS FOR LONG TERM CARE, INC.

(Firm/Company)

15100 TRINITY BLVD., STE.400

(Address)

FORT WORTH, TEXAS 76155

(City/State and Zip code)

For further information concerning this matter, please call:

Jeffrey L. Flowers

at (817

→ 359-2100

(Name of Person)

(Area Code & Daytime Telephone Number)

STREET ADDRESS:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **MAILING ADDRESS:**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

CENTERS FOR LONG TERM CARE OF FLORIDA, INC.

(Name of Corporation)

F9900002269	
(Document Number of Corporation	n (if known)
NEVADA	
(Incorporated Under Laws	of)
This corporation is no longer transacting business or conducting voluntarily surrenders its authority to transact business or conduct	-
This corporation revokes the authority of its registered agent in appoints the Department of State as its agent for service of process time it was authorized to transact business or conduct affairs in Floring in Floring in the corporation of	s based on a cause of action arising during the
The following is a current mailing address for the corporation:	ન્
15100 TRINITY BLVD., STE.40	00 ALLAN F
FORT WORTH, TEXAS 76155 (City/ State /Zip)	31 AHOO ASSEE, FLOOR
The corporation agrees to notify the Department of State in the fut	ure of any change in its mailing address.
(Signature of a director, president or other officer hif in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	01/26/06 (Date)
GARY R. TREBERT (Typed or printed name of person signing)	PRESIDENT (Title of person signing)

FILING FEE \$35