F99000004937

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COVER LETTER

TO: Amendment Section Division of Corporations

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

(Name of Corporation)

DOCUMENT NUMBER: F99000004937

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 C	CARE OF VENICE, INC.
F9900004937 (Document Number of Corporation Properties of Corporation	ation (if known)
NEVADA (Incorporated Under L	2: A TO S
This corporation is no longer transacting business or conductivoluntarily surrenders its authority to transact business or conductivoluntarily surrenders.	
This corporation revokes the authority of its registered agen appoints the Department of State as its agent for service of pro- time it was authorized to transact business or conduct affairs in	cess based on a cause of action arising during the
The following is a current mailing address for the corporation:	
15100 TRINITY BLVD., STE.	400
FORT WORTH, TEXAS 7615 (City/ State /Zip)	55
The corporation agrees to notify the Department of State in the	· -
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	
GARY R. TREBERT (Typed or printed name of person signing)	PRESIDENT (Title of person signing)

FILING FEE \$35