

J17821

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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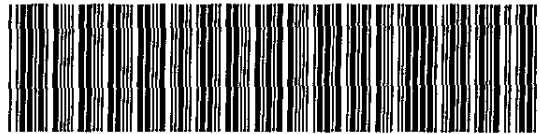
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FL 32399

C. Coulliette JAN 23 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Southern Medical Systems, Incorporated
(Name of Corporation)

DOCUMENT NUMBER: J17821

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

Please return all correspondence concerning this matter to the following:

Philip W. Williams

(Name of Person)

JLG

(Name of Firm/Company)

P.O. Box 21308

(Address)

Tampa, FL 33622-1308

(City/State and Zip Code)

For further information concerning this matter, please call:

Phil Williams

(Name of Person)

at (813) 814-9800

(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

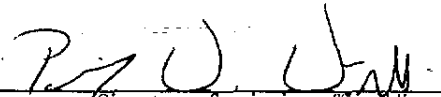
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Philip W. Williams, hereby resign as President/Director
(Title)

of Southern Medical Systems, Incorporated
(Name of Corporation)

J17821 a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(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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SECRETARY OF STATE
TALLAHASSEE, FLORIDA