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CLERK OF STATE  
TALLAHASSEE, FLORIDA

Officer Resignation

T BROWN DEC 13 2005

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A Woman's Touch in Healthcare, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Alice M. Fogle

(Name of Person)

(Name of Firm/Company)

550 E. Plymouth Ave.

(Address)

DeLand , FL 32724

(City/State and Zip Code)

For further information concerning this matter, please call:

Alice M. Fogle

(Name of Person)

at ( 386 ) 734-0550

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

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

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

FILED  
05 DEC -7 AM 8:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

I, Alice M. Fogle, hereby resign as director (Title)

of A Woman's Touch in Health Care, Inc.  
(Name of Corporation)

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

Alice M. Fogle  
(Signature of resigning officer/director)  
*Signed and Submitted to board of directors  
on Dec. 4, 2005*

**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