

P000000027596

Requester's Name

Barton Lake Healthcare Center Inc
672 N Semoran Blvd Ste 205
Orlando, FL 32807

City/State/Zip

Phone #

700005349467--3
-04/25/02--01074--004
*****35.00 *****35.00

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CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

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NEW FILINGS

- ☐ Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other

OTHER FILINGS

- ☐ Annual Report
☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
☐ Resignation of R.A., Officer/Director
☐ Change of Registered Agent
☐ Dissolution/Withdrawal
☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
☐ Limited Partnership
☐ Reinstatement
☐ Trademark
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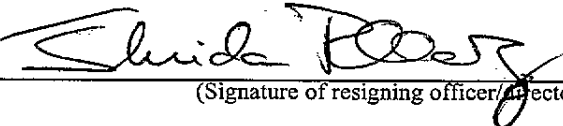
OFFICER / DIRECTOR RESIGNATION

I, FLERIDA CALZADA, hereby resign as DIRECTOR
(Title)

of BARTON LAKE HEALTHCARE CENTER, INC.
(Name of Corporation)

a corporation organized under the laws of the State of FLORIDA

and affirm that the corporation has been notified in writing of the resignation.


(Signature of resigning officer/director)

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