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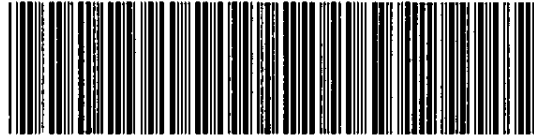
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TO: Amendment Section
Division of Corporations

SUBJECT: Community Care & Neighborhood Mgt. Group Inc.
(Name of Corporation)

DOCUMENT NUMBER: PO2000080101

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

Please return all correspondence concerning this matter to the following:

Michael A. Parker
(Name of Person)

Comm. Care & Neighborhood Mgt. Group Inc.
(Name of Firm/Company)

502 Sunshine Dr.
(Address)

Delray Beach, FL 33444
(City/State and Zip Code)

For further information concerning this matter, please call:

Michael A. Parker at (561) 767-6103
(Name of Person) (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**

I, ROBIN Cogas, hereby resign as VPDT Vice-Pres
(Title)

of Community Care & Neighborhood Mgt. Group Inc.,
(Name of Corporation)

P02000080101, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA.


(Signature of resigning officer/director)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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