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SECRETARY OF STATE
TALLAHASSEE FLORIDA



## **COVER LETTER**

Amendment Section Division of Corporations

TO:

·
SUBJECT: <u>Citrus Park Medical Care, Fric.</u> (Name of Corporation)
DOCUMENT NUMBER: <u>PO50000 61840</u>
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Steven J. Romanello (Name of Person)
Roman ello Profes siaial Association (Name of Firm/Company)
1560 Saugus Crowcate Parkway, Farth Floor (Address)
City/State and Zip Code)
For further information concerning this matter, please call:
Steven J. Romanillo at (954) 331-8020 (Name of Person) (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
Post Office Box 6327
Tallahassee, FL 32314

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

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, Dipak Shah, M.D., hereby resign as Preside,	1+ (Title)		
of Citros Park Medical Care, Fic. (Name of Corporation)	<del></del>		,
(Document Number, if known), a corporation organized under the laws of	the State	e of	
Florida.			
Bohl	_		
(Signature of resigning officer/director)			
	SECRETAR TALLAHASS	06 DEC 27	FII
FILING FEE IS \$35.00 Make checks payable to Florida Department of State and mail t	Y OF STA	7 PH 2:	LED
Make checks payable to Florida Department of State and mail t	10P	10	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314