## P05000/56848

Office Use Only

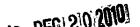


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M/ Did Resign

10 DEC 17 PM 12: 23
SECRETARY OF STATE
TALLAHASSEE, FLORIO



## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Welch & McLoy Pediatric Clinic, Inc
(Name of Corporation)
DOCUMENT NUMBER: <u>P050000156848</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:
Richard J. McLoy
(Name of Person)
Welch & McLoy Pediatric Clinic, Inc.
(Name of Firm/Company)
38051 Pasco Avenue
(Address)
Dade City, FL 33525
(City/State and Zip Code)
For further information concerning this matter, please call:
Richard J. McLoy 848-6747
Richard J. McLoy at (727 ) 848-6747  (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 TO DEC TO PAIR 23

Margaret A. McLoy	, hereby resign as President (Title)
	Title)
of Welch & McLoy Pediatric Clinic, In	ıc.
(Name of Co	prporation)
(Document Number, if known), a	corporation organized under the laws of the State of
Florida	
- Maragaret (Signal	ture 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