

P93000051076

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

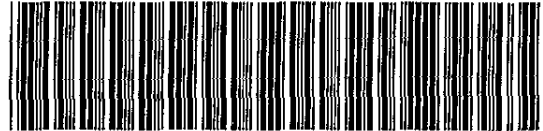
(Business Entity Name)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2002 NOV - 6 PM 1:28

O/D Resign.

11/13/02

DC

EDWARD I. WILLIAMS
5288 Wellfleet Drive North
Sarasota, FL 34241

August 12, 2002

Alliance Medical, Inc
517 Second Street West
Bradenton, FL 34205

Attention: Michael Williams, CEO

Reference: Resignation as Officer

Dear Michael:

This correspondence serves as my formal resignation as Treasurer (and any other office I
any hold) of Alliance Medical, Inc, effective immediately. I trust you will contact the
State, and make the necessary changes.


Thank you,


Edward I. Williams

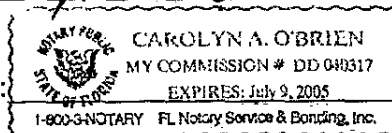
cc: file copy

Date this 12th day of August 2002.

Sworn and subscribed before me this 12th day of August 2002.

Notary Public: 

My Commission expires:



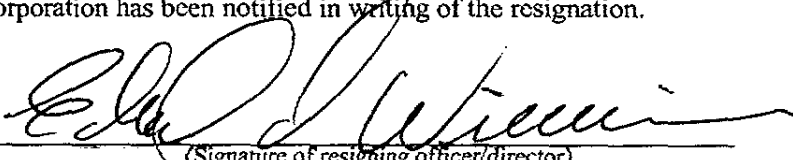
OFFICER / DIRECTOR RESIGNATION

I, EDWARD I. WILLIAMS, hereby resign as Treasurer
(Title)

of ALLIANCE MEDICAL, 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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Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**