

Division of Corporations

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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## To:

Division of Corporations  
Fax Number : (850) 617-6380

## From:

Account Name : HENDERSON, FRANKLIN, STARNES & HOLT, P.A.  
Account Number : 075410002172  
Phone : (239) 344-1100  
Fax Number : (239) 344-1200

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

REGISTERED AGENT RESIGNATION  
ANCHOR HEALTH CENTERS, P.A.

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$140.00

\$ 96.25

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 31 AM 10:29

2012 JUL 31 AM 8:07

TO AGENCY OF FILING  
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T. BROWN

FAX AUDIT #: H12000194531 1

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 JUL 31 AM 10:29**RESIGNATION OF REGISTERED AGENT  
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, THOMAS P. CLARK

(Name of Registered Agent)

hereby resigns as Registered Agent for ANCHOR HEALTH CENTERS, P.A.

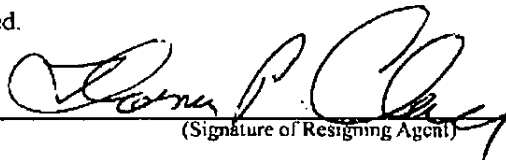
(Name of Corporation)

P96000075933

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

  
(Signature of Resigning Agent)

If signing on behalf of an entity:

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(Typed or Printed Name)

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(Capacity)**Fee for filing this document:**

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/  
withdrawn corporationMake checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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