

P97000015116

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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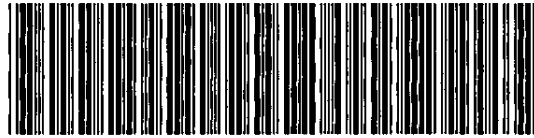
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T. Roberts JUL 18 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Fit For Life Health Services, P.A.
(Name of Corporation)

DOCUMENT NUMBER: P97000015116

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

Please return all correspondence concerning this matter to the following:

Suzanne Seekins D.C., President

(Name of Person)

Fit For Life Health Services, P.A.

(Name of Firm/Company)

5429 Airport Road North

(Address)

Naples, FL 34109

(City/State and Zip Code)

For further information concerning this matter, please call:

Suzanne Seekins D.C., President at (239) 513.9800

(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, Stephen D. Stohler D.C., hereby resign as President/Officer/Director
(Title)

of Fit For Life Health Services, P.A.
(Name of Corporation)

P97000015116, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Stephen D. Stohler DC
(Signature of resigning officer/director)

FILED
07 JUL 16 PM 3:01
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