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FROM THE DESK OF
H. DARRELL WHITE
e-mail: dwhite@mcfarlain.com

November 23, 1998

Department of State
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

600002695456--4
-11/24/98--01052--024
1050.00 **87.50

VIA HAND DELIVERY

Re: Resignation(s) of Registered Agent

*Resignation
of
RA*

In Re Arch Creek Healthcare, Inc.; Chartwell Healthcare of Florida, Inc.;
Chartwell Healthcare Services of Florida, Inc.; Holly Point Healthcare, Inc.;
Jackson Manor Healthcare, Inc.; Jupiter Healthcare, Inc.;
Manhattan Healthcare, Inc.; Oakwood Terrace Healthcare, Inc.;
Palmetto Sub-Acute Care, Inc.; Pensacola Healthcare, Inc.;
Ponce de Leon Healthcare, Inc.; Product Systems of Florida, Inc.;
ProPersonnel of Florida, Inc.; Snapper Healthcare, Inc.
& U.S.A. Pharmacy of Florida, Inc.

FILED
98 NOV 24 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ladies/Gentlemen:

Enclosed for filing please find 15 Resignations of Registered Agent for the above entities.

I would like to pick up a date-stamped copy of each of these showing the date and time of filing. Please call me at 222-2107 when these are ready.

Thank you for your assistance.

Sincerely,

H. Darrell White
H. Darrell White

HDW/ca

Enclosures (15 Resignations + 1 copy of each)

cc: Irving D. Boyes
16910 Dallas Parkway, Suite 200
Dallas, TX 75248

Michael D. Hesse, Esq.

*If Any Problems
Please Call Carol Allen
222-2107
Call when Ready
DR
11/24/98*

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 607.0502(2), Florida Statutes (1997), the undersigned, **H. Darrell White, Jr.**, hereby resigns as Registered Agent for **Jupiter Healthcare, Inc.**

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.

H. Darrell White, Jr.
(Signature of resigning agent)

Date: 11/23/98

FILED
98 NOV 24 PM 12:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Date: _____

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved corporation