

P97000073350

October 7, 2002

Copy Sent by Fax to Addressee 850 245 6897

Florida Department of State
Division of Corporations
Box 6327
Tallahassee, Florida 32314

Resignation
officer
200008326992--6
-10/11/02--01020--003
*****35.00 *****35.00

Re: North Lakeland Senior Living FEI#593452282

Dear Sirs:

Please remove my name as a Director of North Lakeland Senior Living, Inc. I have enclosed the \$35.00 fee.

Thank you,


Jim Peters

FILED
02 OCT 11 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ADR
10/15/02

OFFICER / DIRECTOR RESIGNATION

FILED
02 OCT 11 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, Jim Peters, hereby resign as Director
(Title)

of North Lakeland Senior Living, 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.

Jim Peters
(Signature of resigning officer/director)

5-1-02

FILING FEE IS \$35.00

**Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314**