P970001000184

(Re	equestor's Name)	 :
(Ac	ldress)	
. (Ad	ldress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	me)
(Document Number)		
Certified Copies	_ Certificates	s of Status. <u>* • ; • .</u>
Special Instructions to Filing Officer:		

Office Use Only



200162201862

10/27/09--01033--011 **166.29

SECRETARY OF STATE ALLAHASSEE, FLORIDA

OD RES (10/25/09

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ENHANCED LIVING, INC.
(Name of Corporation)
DOCUMENT NUMBER: P97000100684
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
JUDY JASPER
(Name of Person)
ENHANCED LIVING, INC.
(Name of Firm/Company)
2903 TAUNTON DRIVE WEST
(Address)
BRADENTON, FL 34205
(City/State and Zip Code)
For further information concerning this matter, please call:
JUDY JASPER at (941) 773-1348 (Name of Person) (Area Code & Daytime Telephone Number)
(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

EDWARD JASPER	, hereby resign as PRESIDENT
7	(Title)
ENHANCED LIVING, INC.	
(Nam	e of Corporation)
P97000100684 (Document Number, if known)	, a corporation organized under the laws of the State of
FLORIDA	
5.1:	

FILING FEE IS \$35.00

of resigning officer/director)

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

SECRETARY OF STATE A
TALLAHASSEE, FLORIBA
09 OCT 27 PH 12: 12