## P98000054275

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
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## TRANSMITTAL LETTER

SUBJECT: HOME CARE INVESTORS, INC.
(Name of Corporation)
DOCUMENT NUMBER: P98000054275
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
DAVID MILNER
(Name of Person)
HOME CARE INVESTORS, INC.
(Name of Firm/Company)
5950 W OAKLAND PK BLVD #209
(Address)
FORT LAUDERDALE FL 33313
(City/State and Zip Code)
For further information concerning this matter, please call:
DAVID MILNER at ( 954 ) 485-4006 (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.
Mailing Address:  Amendment Section  Division of Corporations  P.O. Box 6327  Tallahassee FL 32314  Street Address:  Amendment Section  Division of Corporations  409 E. Gaines Street  Tallahassee FL 32314

**TO:** Amendment Section Division of Corporations

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I, MARK GERSTLE	hereby resign as VICE PRESIDENT (Title)	
of HOME CARE INVESTORS, II		
P98000054275 (Document Number, if known)	, a corporation organized under the laws of the State of	
FLORIDA		
	Ot SEP - 1 PM 2: 06  Signature of resigning officer/director)	

## 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