

V16551

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SARASOTA THERAPY CENTER
(Name of Corporation)

DOCUMENT NUMBER: V16551

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

Please return all correspondence concerning this matter to the following:

EDWARD H SARBEY

(Name of Person)

SARASOTA THERAPY CENTER

(Name of Firm/Company)

PO BOX 5026

(Address)

SARASOTA, FL 34237

(City/State and Zip Code)

For further information concerning this matter, please call:

EDWARD H SARBEY

(Name of Person)

at (**941**) **366-0600**

(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

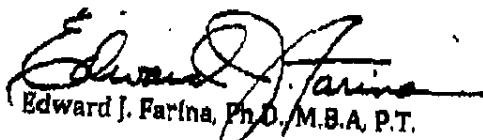
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, EDWARD J FARINA, hereby resign as SECRETARY
(Title)

of SARASOTA THERAPY CENTER
(Name of Corporation)

V16551, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


Edward J. Farina, Ph.D., M.B.A., P.T.
(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

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12 SEP 10 PM 3:19
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