

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**APPLICATION
FOR
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 JAN -3 AM 11:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P92000014018

1. Corporation Name

Dale A. Rolando, D.M.D. and Sue E. Rolando, D.M.D., P.A.

Principal Place of Business

Mailing Address

REINSTATEMENT 97-00

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

4303 Curry Ford Road

Suite, Apt. #, etc.

3. New Mailing Office Address, if Applicable

4303 Curry Ford Road

Suite, Apt. #, etc.

4. Date Incorporated or Qualified

To Do Business in Florida

01/01/93

5. FEI Number

59-3163423

Applied For

Not Applicable

City & State

Orlando, Florida

City & State

Orlando, Florida

Zip

32806

Country

USA

Zip

32806

Country

USA

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
D/P/S	Rolando, Dale A., D.M.D.	4303 Curry Ford Road	Orlando, Florida 32806
D/VP/T	Rolando, Sue E., D.M.D.	4303 Curry Ford Road	Orlando, Florida 32806

500003099955--6
-01/15/00--01001--002
***1200.00 ***1200.00

8. Name and Address of Current Registered Agent

Diamond, Philip A.
255 South Orange Avenue
Suite 1600
Orlando, Florida 32801

9. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State

FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

REGISTERED AGENT MUST SIGN

Date

12/29/99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Sue Rolando Sue Rolando Vice-Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12/29/99

Daytime Phone #

(407) 898-7401

CR2E040 (1/98)