2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 15, 2000 8:00 am Secretary of State DOCUMENT # P95000042314 1. Entity Name HERNANDO SKIN AND CANCER CENTER, P.A. 08-15-2000 90015 012 ***150.00 Principal Place of Business Mailing Address 14540 CORTEZ BLVD 14540 CORTEZ BLVD. SUITE 200 SUITE 200 BROOKSVILLE FL 34613 **BROOKSVILLE FL 34613** 2. Principal Place of Business 3. Mailing Address 7379 Commercial Way Cortez DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number 59-3322434 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BIRGILLO, RAY CPA MISPELLES 5/B 7379 COMMERCIAL WAY VIRGILIO Street Address (P.O. Box Number is Not Acceptable) BROOKSVILLE FL 34613 City Zin Code tement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity submits SIGNATURE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 12. Delete TITLE TITLE Reed Oliver M NAME REED, OLIVER M MD NAME 12900 Cortez Blod #205 STREET ADDRESS 14540 CORTEZ BLVD #200 STREET ADDRESS CITY-ST-ZIP **BROOKSVILLE FL 34613** CITY-ST-ZIP Brooksmille &1 34613 Addition TITLE TITI F Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE Delete TITLE Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

changed, or on an attachment with an address, with



7379 Commercial Way, Weeki Wachee, FL 34613 • 352-596-1985 • FAX 352-596-1070

July 24, 2000

Florida Department of State Tallahassee, Florida

This letter is to request an abatement of the penalty fees being imposed on my client due to a late filing of this form.

We believe there are mitagating circumstances that divert fault for the late filing from the corporation Hernando Skin & Cancer Center and place it on uncontrollable circumstances related to the transition from one accountant to another.

As the corporation's accountant it was my reponsibility to receive and process the annual report in a timely manner. We were not made aware of this procedure by the former accountant and therefore did not request a change in registered agents.

Accordingly, we respectfully request that the Department consider these circumstances and abate the penalty fee.

In anticipation of your cooperation in this matter and positive reponse to our request, we are enclosing \$150.00 as opposed to \$550.00.

My office is now the registered agent for this corporation. We would appreciate your comments and any questions be directed to us.

Sincerely,

Kaymood P. Vargilio, CPA