

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

08 FEB 13 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717996

1. Corporation Name

Florida Association of Periodontists, Inc.

LY
2-14-08

900117962829
02/13/08--01028--004 **245.00

2. Principal Office Address - No P.O. Box #

34049 Woodland Circle

Suite, Apt. #, etc.

3. Mailing Office Address

34049 Woodland Circle

Suite, Apt. #, etc.

City & State

Ridge Manor, FL

City & State

Ridge Manor, FL

Zip

33523

Country

USA

Zip

33523

Country

USA

CR2E081 (12/07)

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number
23-7264533

☐ Applied For
☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Marlinda Fulton

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

34049 Woodland Circle

Suite, Apt. #, Etc.

City

Ridge Manor

State

FL

Zip Code

33523

☒ The reinstatement fee is imposed, except in circumstances which the entity did not receive the prior notices. By checking this box, you are certifying the prior notices were not received and requesting the reinstatement fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Marlinda Fulton, Exec. Dir.
REGISTERED AGENT MUST SIGN

Date 2-11-08

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	Dr Mark Forrest	601 N Flamingo Rd #318	Pembroke Pines, FL 33028
P-elec	Dr James Antoon	1281 Florida Ave	Rockledge, FL 32955
S/T	Dr James Willson	1810 S MacDill Ave	Tampa, FL 33629
Ma L	Dr Lee Cohen	4520 Donald Ross Rd #110	Palm Beach Gardens, FL 33418
Ma L	Dr Gregory Oxford	201 Health Park Blvd #216	St Augustine, FL 32086
Past P	Dr Hank Towle	13636 SW 4th Lane	Newberry, FL 32699

10. 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 contained in Chapter 119, 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:

Marlinda Fulton, Marlinda FULTON
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-11-08

Daytime Phone #

813 541 4056

**Florida
Association of
Periodontists**



February 8, 2008

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314-6327

Re: Waiver of Non-Profit Reinstatement Fee

To date the Florida Association of Periodontists, Document #717996, has not received a renewal notice since 2005. Unfortunately, a disgruntled former employee did not alert us to the renewal or forward the 2005 notice in the mail during a period of transition of office staff and association change of address.

We apologize for the inconvenience and ask for a waiver of the reinstatement fee. Enclosed is the Corporation Reinstatement Form and payment of \$245.00 which covers the annual fee from 2005-2008.

Please contact the Florida Association of Periodontists office immediately (352-232-6800 or fap@tampabay.rr.com) if waiver of reinstatement fee is not granted so payment may be remitted. Thank you for your patience in this matter.

Sincerely,

A handwritten signature in black ink, appearing to read 'Mark Forrest', written over the word 'Sincerely,'.

Mark Forrest, D.M.D.
President

A handwritten signature in black ink, appearing to read 'James W. Antoon', written below the signature of Mark Forrest.

James W. Antoon, D.M.D.,
President Elect