

1042

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 AUG 31 AM 8:14

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 770390

1. Corporation Name

Hernando County Medical Society
Alliance, Inc.

2. Principal Office Address

7533 Jomel Dr.

Suite, Apt #, etc

3. Mailing Office Address

Suite, Apt #, etc

City & State

Spring Hill, FL

Zip 34607-2018 Country: Hernando

City & State

Zip

Country

REINSTATEMENT

CR2E081 (12/05)

03-06

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

59-247122

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

Maureen Soliman

Street Address (P O Box Number is Not Acceptable)

7533 Jomel Drive

Suite, Apt #, Etc

City

Spring Hill, FL 34607-2018

State

FL

Zip Code

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

X Maureen Soliman

REGISTERED AGENT MUST SIGN

Date X 8/20/06

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 |
|---|--------------------------------------|---|-----------------------|
| Pres | Linda Rebeem | 11492 Stoneville Ct | Spring Hill, FL 34609 |
| Treas | Susan McCarragher | 1604 Lake Polo Dr | Odessa, FL 33556 |
| Part Pres | Maureen Soliman | 7533 Jomel Dr | Spring Hill, FL 34607 |
| 800079715616 09/12/06--01023--025 **245.00 | | | |

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:

X Maureen Soliman Part Pres

Date

8/20/06

Daytime Phone #

2 of 2



Florida Medical
Association Alliance
P.O. Box 10269
123 S. Adams Street
Tallahassee, FL 32301
1-850-224-6496
1-800-762-0233
FAX 850-513-9477

2005-2006
President
Karen Chouinard
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Winter Haven, FL 33880
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Kcsew@aol.com

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First Vice President
Elaine Hale

Secretary
Ann Anderson

Treasurer
Diane Andrews

Northeast DVP
Lauren Delorio
Shar Dognovan

Northwest DVP
Sandy Roberts

East Central DVP
Shirley Davis

South DVP
Annette Baine

Southwest DVP
Mary Troutman
Liza Battaglia

West Central
Pamela Arain

Executive Director
Heide Farmarco

Associate Director
Tamara Buckhalter

Maureen Soliman
7533 Jomel Drive
Spring Hill, FL 34607-2018
(352) 596-9500

August 17, 2006

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

To Whom It May Concern:

I am writing in reference to reinstating the Hernando County Medical Society Alliance, Inc. I have enclosed the filing fees for the years we missed; 2003-2006. Also, according to my phone conversations with your company's representative, I am also writing to let you know that we did not receive the appropriate documents to file in 2003, therefore, we were not aware that our corporation would be dissolved and we ask that you waive the \$175 penalty. I will be sure to follow up every year and make sure the appropriate documents are filed in a timely manner. I appreciate your assistance with our corporation's reinstatement. Please feel free to call me if there is anything else that needs to be done to complete our reinstatement.

Respectfully,

Maureen Soliman *Post President '06*

Maureen Soliman
Hernando County Alliance President

FMA Alliance...dedicated to health education, wellness and community service