

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

2007 SEP 10 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # F03000002455

1. Corporation Name

HEARTWARE, INC.
F03000002455

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

3351 EXECUTIVE WAY

Suite, Apt. #, etc.

City & State

MIRAMAR, FL

Zip

33025

Country

USA

3. Mailing Office Address

3351 EXECUTIVE WAY

Suite, Apt. #, etc.

City & State

MIRAMAR, FL

Zip

33025

Country

USA

08/24/07 01029 011 \$1200.00
CR2E081 (1/07)

**4. Date Incorporated or Qualified
To Do Business in Florida**

MAY 15, 2003

5. FEI Number

550828419

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

CT CORPORATION

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

1200 SOUTH PINE ISLAND ROAD

Suite, Apt. #, Etc.

City

PLANTATION

State

FL

Zip Code

33324

☐ 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.

WC7000042357

8. I, being appointed the registered agent of the above named corporation, am familiar with an Barbara A. Burke **Special Assistant Secretary** **of section 607.0505 or 617.0503, F.S.**

Signature of
Registered Agent

Barbara A. Burke

Special Assistant Secretary

Date

9-6-07

REGISTERED AGENT MUST SIGN

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
CEO	DOUGLAS GODSHALL	3351 EXECUTIVE WAY	MIRAMAR, FL 33025
CFO	DAVID MCINTYRE	3351 EXECUTIVE WAY	MIRAMAR, FL 33025
COO	DORIER ROWE	3351 EXECUTIVE WAY	MIRAMAR, FL 33025
CSD	JEFFREY LA ROSE	3351 EXECUTIVE WAY	MIRAMAR, FL 33025

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David McIntyre CFO

Date

8/20/7

Daytime Phone #

854 874 1180