

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

96 NOV 18 AM 11:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # F05223

1. Corporation Name

NEUROMED, INC.

Principal Place of Business

Mailing Address

KTG&S REGISTERED AGENT CORPORATION  
100 S.E. 2ND STREET, 28TH FLOOR  
MIAMI FL 33131

KTG&S REGISTERED AGENT CORPORATION  
100 S.E. 2ND STREET, 28TH FLOOR  
MIAMI FL 33131

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

2. New Principal Office Address, If Applicable

ONE ALLENTOWN PKWY  
Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

ONE ALLENTOWN PKWY  
Suite, Apt. #, etc.

4. Date Incorporated or Qualified  
To Do Business in Florida

11/12/1980

5. FEI Number

59-2071994

Applied For

Not Applicable

City & State

ALLEN, TX

City & State

ALLEN, TX

Zip

75002

Country

USA

Zip

75002

Country

USA

6. CERTIFICATE OF STATUS DESIRED ☐

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

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	City / State / Zip
PD	THOMPSON, THOMAS C.	ONE ALLENTOWN PARKWAY	ALLEN TX 75002
VST	MERRILL, F. ROBERT III	ONE ALLENTOWN PARKWAY	ALLEN TX 75002
V	CARLSON, GEORGE L.	ONE ALLENTOWN PARKWAY	ALLEN TX 75002

800002010748--0  
-11/21/96--01022--003  
\*\*\*\*375.00 \*\*\*\*375.00

8. Name and Address of Current Registered Agent

KTG&S REGISTERED AGENT CORPORATION  
100 S.E. 2ND STREET  
28TH FLOOR  
MIAMI FL 33131

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

*Maich Audubach*  
REGISTERED AGENT  
KTG&S REGISTERED AGENT CORP.

Date 11/15/96

11. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. 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:

*F. Robert Merrill III*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
F. ROBERT MERRILL III SECRETARY

10/25/96 (913) 390-4300  
Date Daytime Phone