

FD6000004219

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

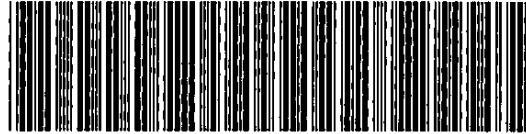
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300073127283

05/05/06--01036--020 \*\*78.75

FILED  
06 JUN 16 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

8679

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Hightower Medical Systems, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Michael Craig Hightower

(Name of Person)

Hightower Medical Systems, Inc.

(Firm/Company)

510 NE 291 Highway

(Address)

Lee's Summit, MO 64086

(City/State and Zip code)

For further information concerning this matter, please call:

M. Craig Hightower

(Name of Person)

at ( 816 ) 554-8680 ext 301

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

☐ \$70.00 Filing Fee

☒ \$78.75 Filing Fee &  
Certificate of Status

☐ \$78.75 Filing Fee &  
Certified Copy

☐ \$87.50 Filing Fee,  
Certificate of Status &  
Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 8, 2006

MICHAEL CRAIG HIGHTOWER  
510 NE 291 HIGHWAY  
LEE'S SUMMIT, MO 64086

SUBJECT: HIGHTOWER MEDICAL SYSTEMS, INCORPORATED  
Ref. Number: W06000021279

We have received your document for HIGHTOWER MEDICAL SYSTEMS, INCORPORATED and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Document Specialist

Letter Number: 906A00032532

**PLEASE NOTE:** You have included an alternate name in your document that is not allowed under corporate law. If you want to do business in Florida under a different name other than the one you incorporated under, you will need to file a fictitious name application. You can find this form on our website at [www.sunbiz.org](http://www.sunbiz.org).

RECEIVED

06 JUN 19 PM 12:32

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**B. OFFICERS**

President: Michael Craig Hightower

Address: 503 NW Timber Ridge Trl

Lee's Summit, MO 64081

Vice President: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Secretary: Kelley Lynne Hightower

Address: 503 NW Timber Ridge Trl Lee's Summit, MO 64081

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. \_\_\_\_\_

(Signature of Director or Officer listed in number 12 of the application)

14. Michael C. Hightower

(Typed or printed name and capacity of person signing application)

FILED  
06 JUN 16 PM 3:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Jun.12. 2006 8:11AM HMS, INC.

No.6396 P. 3/3

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

**1. Hightower Medical Systems, Incorporated**

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

**2. Missouri**

**3. 58-2167678**

# STATE OF MISSOURI



Robin Carnahan  
Secretary of State

**CORPORATION DIVISION  
CERTIFICATE OF GOOD STANDING**

I, ROBIN CARNAHAN, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

**HIGHTOWER MEDICAL SYSTEMS, INCORPORATED  
00463798**

was created under the laws of this State on the 21st day of December, 1998, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 1st day of May, 2006

A handwritten signature in cursive script that reads "Robin Carnahan".

Secretary of State

