

F11000002853

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

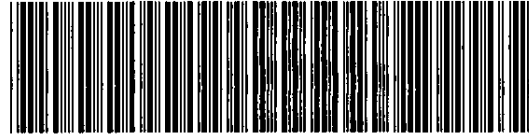
(Business Entity Name)

(Document Number)

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

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06/24/11--01009--029 \*\*78.75

W11-34355

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2011 JUL 12 PM 4:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EBurch JUL 14 2011

## COVER LETTER

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

**SUBJECT:** THE PHYSICIANS ALLIANCE CORPORATION

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," or "Certificate of Good Standing" 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:

John Woods

Name of Person

The Physicians Alliance Corporation

Firm/Company

7936 Office Park Blvd, Ste A

Address

Baton Rouge, Louisiana 70809

City/State and Zip code

cwmacdonald@tpacsecure.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Woods

Name of Person

at ( 225 ) 248-1011

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



RECEIVED

11 JUL 12 PM 1:01

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS  
Division of Corporations

June 27, 2011

JOHN WOODS  
7936 OFFICE PARK BLVD STE A  
BATON ROUGE, LA 70809

SUBJECT: THE PHYSICIANS ALLIANCE CORPORATION  
Ref. Number: W11000034355

We have received your document for THE PHYSICIANS ALLIANCE CORPORATION 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 name of your corporation is not available in Florida. An out-of-state corporation whose name is not available must adopt an alternate corporate name for use in Florida. The alternate corporate name must contain "Incorporated," "Company," "Corporation," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp." Please enter the alternate corporate name in the space provided in number one of the application.

Simply adding "of Florida" or "Florida" to the end of a name is not acceptable.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

A post office box is not an acceptable address for the registered agent.

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) 245-6928.

Tim Burch  
Regulatory Specialist II

Letter Number: 011A00015424

**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. The Physicians Alliance Corporation**

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

Tampa Bay Physicians Alliance Corporation

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

**2. Louisiana**

(State or country under the law of which it is incorporated)

**3.**

(FEI number, if applicable)

**4. December 8, 2003**

(Date of incorporation)

**5.**

perpetual

(Duration: Year corp. will cease to exist or "perpetual")

**6.**

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

**7. 7936 Office Park Blvd, Ste A, Baton Rouge, LA 70809**

(Principal office address)

7936 Office Park Blvd, Ste A, Baton Rouge, LA 70809

(Current mailing address)

**8. Physician collaboration for better healthcare improvements in the community.**

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

**9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)**


Name: John Woods

Office Address: 5526 Terrain De Golf Dr

Lutz, Florida 33558  
(City) (Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

  
(Registered agent's signature)

**11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.**

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TALLAHASSEE  
FLORIDA

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

**A. DIRECTORS**

Chairman: Dr. Kenneth Cranor

Address: 7936 Office Park Blvd, Ste A  
Baton Rouge, LA 70809

Vice Chairman: Dr. Edwin Walker

Address: 7936 Office Park Blvd, Ste A  
Baton Rouge, LA 70809

Director: Dr. Ernest Mencer

Address: 7936 Office Park Blvd, Ste A  
Baton Rouge, LA 70809

Director: Dr. Williams Wall

Address: 7936 Office Park Blvd, Ste A  
Baton Rouge, LA 70809

**B. OFFICERS**

President: Dr. Kenneth Cranor

Address: 7936 Office Park Blvd, Ste A  
Baton Rouge, LA 70809

Vice President: John Woods

Address: 7936 Office Park Blvd, Ste A  
Baton Rouge, LA 70809

Secretary: John Woods

Address: 7936 Office Park Blvd, Ste A, Baton Rouge, LA 70809

Treasurer: John Woods

Address: 7936 Office Park Blvd, Ste A, Baton Rouge, LA 70809

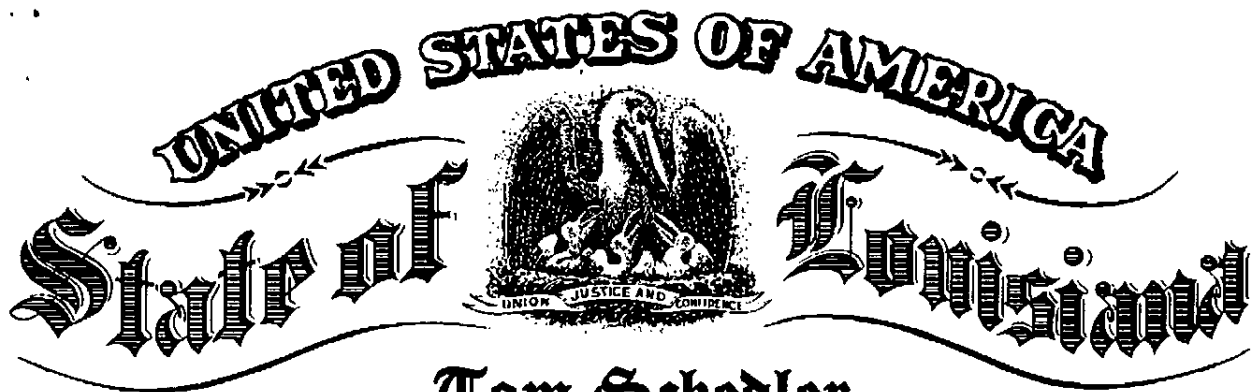
**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Edwin Woods  
(Typed or printed name and capacity of person signing application)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



**Tom Schedler**  
SECRETARY OF STATE

*As Secretary of State of the State of Louisiana, I do hereby Certify that*

the Articles of Incorporation of

**THE PHYSICIANS ALLIANCE CORPORATION**

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Incorporation was issued on December 08, 2003,

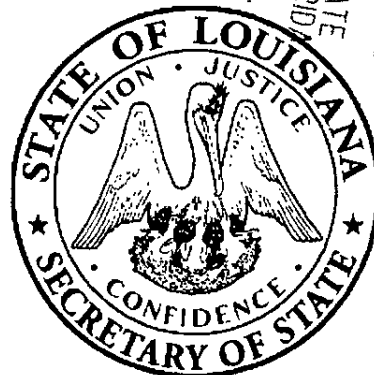
I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

June 21, 2011

*Secretary of State*

Web 35604720D



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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Certificate ID: 10177142#S9E52

To validate this certificate, visit the following web site,  
go to **Commercial Division, Certificate Validation**,  
then follow the instructions displayed.  
[www.sos.louisiana.gov](http://www.sos.louisiana.gov)