

F/2000003658

(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:

CORRECTED LINE # 1 (NAME)
AND LINE # 4 (DATE OF INC.)
TO MATCH CONNECTICUT
CERTIFICATE. ALSO, PER
TELEPHONE CONVERSATION
WITH PATRICIA HOLLAND
ADDED ALT. NAME.

Office Use Only

K 09/06/12



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12 SEP -5 PM 4:32
FALL RIVER, MA
FALL RIVER, MA

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: PARKER MEDICAL, 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," 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:

PATRICIA HOLLAND

Name of Person

PARKER MEDICAL, INC.

Firm/Company

137 NEW MILFORD ROAD EAST

Address

BRIDGEWATER, CT 06752

City/State and Zip code

PHOLLAND96@SNET.NET

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

For further information concerning this matter, please call:

PATRICIA HOLLAND

Name of Person

at (860) 350-4304

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

**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. PARKER MEDICAL INC.

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

PARKER MEDICAL CT INC.

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

2. CONNECTICUT

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

3. 06-1108422

(FEI number, if applicable)

4. MAY 30TH, 1984

(Date of incorporation)

5. PERPETUAL

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

6. JANUARY 2013 ESTIMATED DATE

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

7. 137 NEW MILFORD ROAD EAST, BRIDGEWATER, CT 06752

(Principal office address)

137 NEW MILFORD ROAD EAST, BRIDGEWATER, CT 06752

(Current mailing address)

8. Medical and industrial x-ray component engineering and research

(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: William Holland, Sr.

Office Address: 66 Kipling Plaza

Clearwater, Florida 33767

(City)

(Zip code)

12 SEP -5 PM 4:32
STATE
TALLAHASSEE, FLORIDA

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.

William Holland Sr.

(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.

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

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: See attached list

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: William P. HOLLAND, SR.

Address: 33 STEPHANIE DRIVE
NEW MILFORD, CT 06776

Vice President: _____

Address: _____

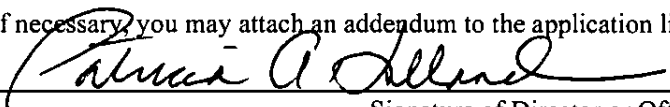
Secretary: GERALDINE HOLLAND

Address: 33 STEPHANIE DRIVE, NEW MILFORD, CT 06776

Treasurer: PATRICIA HOLLAND

Address: 96 BACON ROAD, ROXBURY, CT 06783

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. PATRICIA HOLLAND, TREAS/ASST Sec
(Typed or printed name and capacity of person signing application)

NEW OFFICER / DIRECTOR INFORMATION

Name:

William Holland, Sr.

Matthew Holland

Michael Holland

Timothy Holland

Geraldine Holland

Patricia Holland

Christine Holland

Title:

President

Vice President, Machine Operations

Shareholder

Vice President, Engineering

Secretary

Treasurer and Assistant Secretary

Vice President, Sales and Marketing

Residence Address:

33 Stephanie Drive, New Milford, CT 06776

88 Chapin Road, New Milford, CT 06776

5 April Drive, New Milford, CT 06488

156 Scatacook Lane, Southbury, CT 06776

33 Stephanie Drive, New Milford, CT 06783

96 Bacon Road, Roxbury, CT 06776

364 Wellsville Avenue, New Milford, CT 06776

Business Address (Same for all officers):

Parker Medical, Inc.
137 New Milford Road East

RECEIVED
FALLABEE, FLORIDA

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Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof,
DO HEREBY CERTIFY, that the certificate of incorporation of

PARKER MEDICAL INC.

a domestic STOCK corporation, was filed in this office on May 30, 1984, a certificate of dissolution
has not been filed, the corporation has filed all annual reports, and so far as indicated by the records of
this office such corporation is in existence.



Secretary of the State

Date Issued: August 30, 2012

FILED
12 SEP -5 PM 4:32
TALLAHASSEE, FLORIDA
STATE