



# THE COMPANY CORPORATION

1313 N. Market Street • Wilmington, Delaware 19801-1151 • Telephone: (302) 575-0440 • Fax: (302) 575-1346

November 20, 1996

**F960000006328**

Corporate Records Bureau  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: HEARITE AUDIOLOGICAL HEARING AID & REPAIR CENTERS, INC.  
9610042669876

700002021887--4  
-12/06/96--01028--004  
\*\*\*\*\*70.00 \*\*\*\*\*70.00

Dear Sir or Madam:

Enclosed please find Application for Authority (and related documents, if appropriate) and our check in the amount of \$70.00 for HEARITE AUDIOLOGICAL HEARING AID & REPAIR CENTERS, INC..

Please file and return all related correspondence to my attention at the address listed above.

Please feel free to contact me directly at 1-302-575-0440, ext. 7003, with questions regarding the enclosed application.

Sincerely,

*Laurel Lockhart*

Laurel J. Lockhart  
Corporate Service Representative

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96 NOV 28 AM 8:

DIVISION OF CORPORATIONS

8/12/5  
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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

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

HEARITE Audiological Hearing Aid & Repair Centers, Inc.

(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)

2. Delaware 3. 59-3408261  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10-4-96 5. Perpetual  
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")

6. November 5, 1996  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 617.155, F.S.)

7. 2700 East Bay Dr., Suite 201  
Largo, FL 34641  
(Current mailing address)

8. Audiology related services  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: Larry Wolfe

Office Address: 200A John Knox Road

Tallahassee

Florida

(Zip Code)

32303

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.*

see attached

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

A. DIRECTORS

Chairman: Paula J. Rogers

Address: 1203 Bay Palm Blvd.

Indian Rocks Beach, FL 33785

Vice Chairman: George B. Richards

Address: 5318 Chippendale Circle

Fort Myers, FL 33919

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

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

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

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

B. OFFICERS

President: Terry A. Smith

Address: 2560 River Reach Rd.

Naples, FL 33992

Vice President: Robert F. Davidson

Address: 4012 Ivy Lane

Naples, FL 34112

Secretary: George B. Richards

Address: 5318 Chippendale Circle

Fort Myers, FL 33919

Treasurer: Paula J. Rogers

Address: 1203 Bay Palm Blvd.

Indian Rocks Beach, FL 33785

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

13.

Paula J. Rogers  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14.

Paula J. Rogers, CEO and Treasurer

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

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**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICLE FOR THE SERVICE  
OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON PROCESS MAY BE SERVED.**

In compliance with Section 607.1507, Florida Statutes, the following is submitted:

First, this HEARITE Audiological Hearing Aid & Repair Center, Inc. desiring to  
organize under the laws of the state of Florida with its principal place of business located in the  
city of Largo, State of Florida, has named Larry Wolfe  
located at 200 - A John Knox Road, Tallahassee FL 32303-6643 as its agent for service of  
process within Florida.

Having been named to accept service of process for the above stated corporation, at the  
place designated in this Certificate, I hereby agree to act in this capacity, and I further agree to  
comply with the provisions of all statutes relative to the proper and complete performance of my  
duties.

  
\_\_\_\_\_  
Larry Wolfe

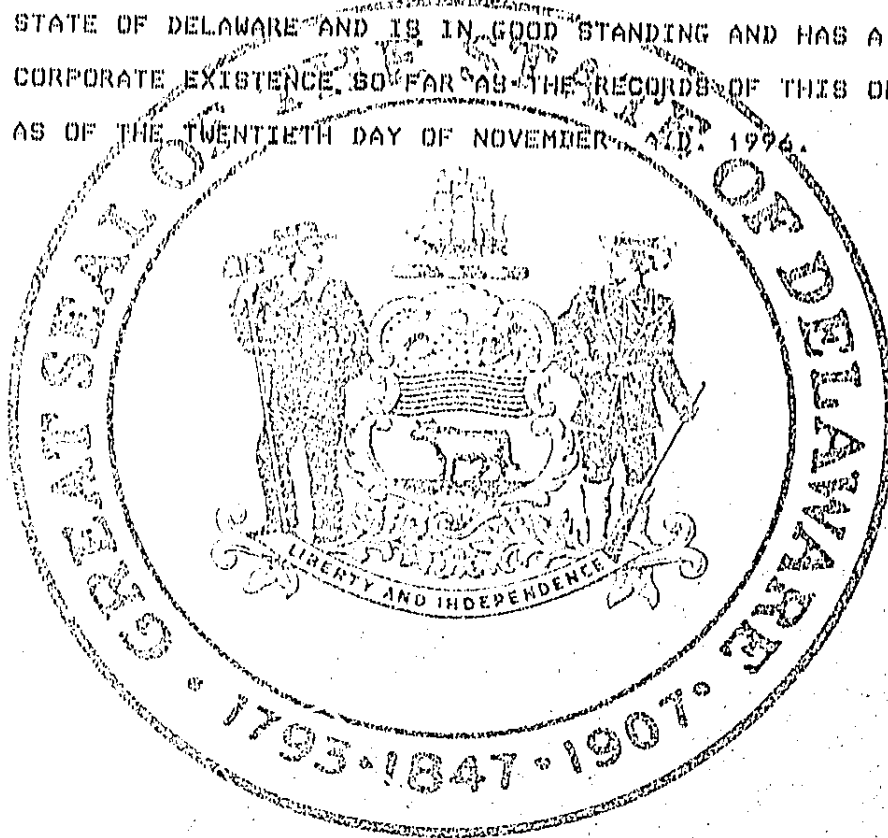
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Date

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State of Delaware  
Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HEARITE AUDIOLOGICAL HEARING AID & REPAIR CENTERS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE, SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF NOVEMBER, A.D. 1994.



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DIVISION OF CORPORATIONS  
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*Edward J. Freel*

Edward J. Freel, Secretary of State

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AUTHENTICATION:

8201201

DATE:

11-20-96