

F98000005608

TRANSMITTAL LETTER

To: Qualification/Tax Lien Section
Division of Corporations

SUBJECT: RIDGEWOOD FINANCIAL INSTITUTE, INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

800002641368--4
-09/16/98--01071--002
****122.50 ****122.50

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.

498-21229

Please return all correspondence concerning this matter to the following:

SHARON S. KLEIN
(Name of Person)

RIDGEWOOD FINANCIAL INSTITUTE, INC
(Firm/Company)

13901 U.S. HWY ONE, STE. 5
(Address)

JUNO BEACH, FL 33408
(City/State/Zip)

Should you need to call someone concerning this matter, please call:

SHARON S. KLEIN at (561) 624-1155
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

#10/8

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

September 17, 1998

SHARON S. KLEIN
RIDGEWOOD FINANCIAL INSTITUTE, INC.
13901 U.S. HWY ONE STE 5
JUNO BEACH, FL 33408

SUBJECT: RIDGEWOOD FINANCIAL INSTITUTE, INC.
Ref. Number: W98000021229

We have received your document for RIDGEWOOD FINANCIAL INSTITUTE, INC. and your check(s) totaling \$122.50. However, the document has not been filed and is being retained in this office for the following:

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report and penalty fees is \$7115.00.

Enclosed please find a copy of section 607.1501 or 617.1501, Florida Statutes, which lists those activities that do not constitute transacting business in this state. If after reviewing this section you determine erroneous information was inserted on the application, a sworn affidavit containing the following information must be submitted: 1.) a statement indicating erroneous information was listed on the application; and 2.) the correct date the corporation began transacting business in Florida prior to the year the application was submitted did not constitute transacting business pursuant to section 607.1501 or 617.1501, Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6097.

Michael Mays
Document Specialist

Letter Number: 898A00047069

BERROCAL & WILKINS

A PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW
TEQUESTA CORPORATE CENTER
SUITE 304
250 TEQUESTA DRIVE
TEQUESTA, FLORIDA 33469
TEL: (561) 746-7455
FAX: (561) 746-6933

ROYAL PALM FINANCIAL CENTER
SUITE 311
759 SOUTH FEDERAL HIGHWAY
STUART, FLORIDA 34994
TEL: (561) 219-0802
WEBSITE
www.berrocal.com

CARLOS J. BERROCAL¹
ROBERT W. WILKINS^{2,5,7}
JANE S. HUNSTON^{3,6}
JAMES L. GREEN⁴

¹ALSO ADMITTED IN DISTRICT OF COLUMBIA
²ALSO ADMITTED IN NEW YORK
³ALSO ADMITTED IN OHIO & COLORADO
⁴ALSO ADMITTED IN ILLINOIS
⁵BOARD CERTIFIED CIVIL TRIAL LAWYER
⁶BOARD CERTIFIED REAL ESTATE ATTORNEY
⁷BOARD CERTIFIED BUSINESS LITIGATION LAWYER

October 2, 1998

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Attention: Michael Mays - Document Specialist
Your Letter No. 898A00047069

RE: RIDGEWOOD FINANCIAL INSTITUTE, INC.
Your Reference No. W98000021229

Dear Mr. Mays:

In response to your letter of September 17, 1998 to our client, Ridgewood Financial Institute, Inc., we have prepared an Affidavit to satisfy the requirements set forth in your letter. Please complete the processing to grant our client authority to do business in the State of Florida.

If you require additional information, please contact the undersigned.

Sincerely,


Carlos J. Berrocal

Enclosures
cc: Herbert Klein

AFFIDAVIT

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DIVISION OF CORPORATIONS

STATE OF FLORIDA
COUNTY OF PALM BEACH

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BEFORE ME, the undersigned notary public, personally appeared HERBERT E. KLEIN ("Affiant"), as President of RIDGEWOOD FINANCIAL INSTITUTE, INC. who, having been first duly sworn according to law, deposes and says:

1. He has personal knowledge of all matters set forth in this affidavit.
2. He is the president of RIDGEWOOD FINANCIAL INSTITUTE, INC. (hereafter referred to as "RIDGEWOOD").
3. Ridgewood is a New Jersey corporation, and has applied with the State of Florida to do business as a foreign corporation.
4. Ridgewood has reviewed the copy of Florida Statute 607.1501 attached hereto as Exhibit "A".
5. Ridgewood is not transacting business within the meaning of Florida Statute 607.1501 (1), based on the exceptions stated in Florida Statute 607.1501 (2)(f) and (i).
6. This affidavit is made and given by affiant with full knowledge of applicable Florida laws regarding sworn affidavits and the penalties and liabilities resulting from false statements and misrepresentations therein.

BY: _____

Herbert E. Klein

STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this 2 day of October, 1998, by Herbert E. Klein. He is personally known to me or produced _____ as identification and [did/did not] take on oath.

Notary Public

[f:\908\affidav]



ELIZABETH BOWIE
MY COMMISSION # CC483478 EXPIRES
August 22, 1999
BONDED THRU TROY FAIR INSURANCE, INC.

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

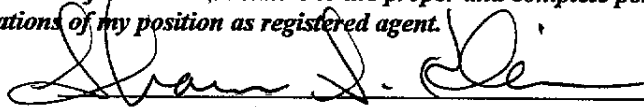
IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. RIDGEWOOD FINANCIAL INSTITUTE, 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. NEW JERSEY 3. 22-2101879
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. FEBRUARY 17, 1976 5. PERPETUAL
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. APRIL 1, 1992
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 13901 U.S. HIGHWAY ONE, SUITE 5
JUNO BEACH, FL 33408
(Current mailing address)
8. PUBLISHING OF NEWSLETTERS AND BOOKS
(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 or Mail Drop Box NOT acceptable)
Name: SHARON S. KLEIN
Office Address: 13901 U.S. HWY ONE, #5
JUNO BEACH, Florida, 33408
(Zip code)

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DIVISION OF CORPORATIONS
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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.

12. Names and addresses of officers and/or directors: (Street address ONLY - P.O. Box NOT acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: HERBERT E. KLEIN

Address: 3004 MAINSAIL CIRCLE

JUPITER, FL 33477

Vice Chairman: SHARON S. KLEIN

Address: 3004 MAINSAIL CIRCLE

JUPITER, FL 33477

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: HERBERT E. KLEIN

Address: 3004 MAINSAIL CIRCLE

JUPITER, FL 33477

Vice President: SHARON S. KLEIN

Address: 3004 MAINSAIL CIRCLE

JUPITER, FL 33477

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

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

13. 

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

14. SHARON S. KLEIN, VICE PRESIDENT

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

STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

RIDGEWOOD FINANCIAL INSTITUTE, INC.

With the Previous or Alternate Name
MANAGED CARE STRATEGIES

*I, the Treasurer of the State of New Jersey,
do hereby certify that the above-named
New Jersey Domestic Profit Corporation was
registered by this office on February 17, 1976.*

*As of the date of this certificate, said business
continues as an active business in the State of New
Jersey. Annual Reports are outstanding for the
following year(s):*

1998

*I further certify that the registered agent and
registered office are:*

Stuart Levine
17 Hanover Road
110 Office Quarters
Florham Park, NJ 07932

Continued on next page . . .

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STATE OF NEW JERSEY
DEPARTMENT OF TREASURY
SHORT FORM STANDING

RIDGEWOOD FINANCIAL INSTITUTE, INC.

With the Previous or Alternate Name
MANAGED CARE STRATEGIES

IN TESTIMONY WHEREOF, I have
hereunto set my hand and
affixed my Official Seal
at Trenton, this
10th day of September, 1998



James A. DiEleuterio, Jr.

James A DiEleuterio, Jr.
Treasurer