

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 NOV 21 PM 3:58

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # K04875

1 Corporation Name

EDWARD J. FLISS, JR., P.A.

Principal Place of Business

Mailing Address

7425 NORTH TAMAM TRAIL
SARASOTA FL 34243

7425 NORTH TAMAM TRAIL
SARASOTA FL 34243



REINSTATEMENT

9/700

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable		3. New Mailing Office Address, if Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		12/03/1987	
City & State		City & State		5. FEI Number	
7425 NORTH TAMAM TRAIL		7425 NORTH TAMAM TRAIL		05-0098871	
SARASOTA FL 34243		SARASOTA FL 34243		Applied For	
Country		Country		Not Applicable	
Zip		Zip		6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>	
Country		Country		39 Fee Additional Tax required for Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
PD	FLISS, EDWARD J. JR.	7425 N. TAMAM TR	SARASOTA FL

#00002356874-0
-11/25/97--01060--015
***750.00 ***750.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
BORNE, STUART 1800 2ND STREET SUITE 955 SARASOTA FL 34236		Name Lynn McGonagill Street Address (P.O. Box Number is Not Acceptable) 1590 1st Street Suite, Apt. #, Etc. Sarasota, FL City State FL Zip Code 34243	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 807.0606, F.S.

Signature of Registered Agent:

REGISTERED AGENT MUST SIGN

Date: 11/12/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 807 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 807.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Edward J. Fliss, Jr.

Date: 11/12/97 Daytime Phone: 9413513466