

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED

02 OCT 11 AM 9:02

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **M95238**

1. Corporation Name

Phillip H. Nunnery, M.D. P.A.

2. Principal Office Address

1936 Jenks Ave.

Suite, Apt. #, etc.

Suite A

City & State

Panama City, FLA.

Zip

32405

Country

USA

3. Mailing Office Address

1936 Jenks Ave.

Suite, Apt. #, etc.

Suite A

City & State

Panama City, FLA.

Zip

32405

Country

USA

**4. Date Incorporated or Qualified
To Do Business in Florida**

8/23/1988

5. FEI Number

592908793

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

**\$8.75 Additional Fee required
for a Certificate of Status**

7. Name and Address of Current Registered Agent

Name **Phillip H. Nunnery, M.D. P.A.**

Street Address (P.O. Box Number is Not Acceptable)

1936 Jenks Ave. Suite A

Suite, Apt. #, Etc.

Suite A

City

Panama City

State
FL

Zip Code

32405

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Phillip H. Nunnery

Date

8/21/02

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|--------------------------------------|---|-----------------------|
| P | Phillip H. Nunnery | 1936 Jenks Ave. Suite A | Panama City, FL 32405 |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 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 607.0401 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

Phillip H. Nunnery

Date

8/21/02

Daytime Phone #

850 763 5954

9/10/02

MICHAEL L. WEIMORTS, P.A.

Attorney and Counselor at Law

The Plaza, Suite 209
4507 Furling Lane
Destin, Florida 32541-5342
850.654.8816
Facsimile: 850.654.9122
*Also Admitted in Alabama

email: mike@cybertronmail.com

October 7, 2002

Reinstatement Bureau
Department of State Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Phillip H. Nunnery, MD, PA
FEI # 592908793

To Whom It May Concern:

I have previously spoken with a representative of The Division of Corporations regarding reinstatement of the above-referenced corporation. Pursuant to their instructions, I have attached a check in the amount of Six Hundred Dollars (\$600.00) and a signed application for reinstatement.

The examiner also indicated that an explanation should be provided for the dissolution. I have spoken extensively with my client, Phillip H. Nunnery, MD, who informed me he moved from the address at 717 East 7th Street, Panama City, FL 32401 before fees became due for calendar year 1999. At the time, Dr. Nunnery moved his office to Suite A, 1936 Jenks Avenue, Panama City, FL 32405. The building which his company has previously occupied was demolished. Although Dr. Nunnery had filed a change of address form with his forwarding address with the U.S. Postal Service, he did not receive notification of renewal fees or uniform business reports from the Department of State.

Dr. Nunnery had been diligent about maintaining the status of his corporation from its inception in 1988. This is evidenced by his record of filing an annual report in each year before 1999.

Please allow this letter to serve as explanation for Dr. Nunnery's failure to receive annual reports

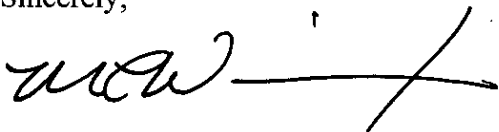
Reinstatement Bureau

October 7, 2002

Page Two

and notification of amounts due for the above-referenced corporation. Thank you for your professional attention to this matter. Should you have any questions, please do not hesitate to call.

Sincerely,

A handwritten signature in black ink, appearing to read 'MLW', followed by a long horizontal line that ends in a diagonal stroke.

Michael L. Weimorts, Esq.

MLW/hls

cc. Phillip H. Nunnery, MD.