

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000000225

1. Corporation Name

PASCO COUNTY IPA, INC.

Principal Place of Business

Mailing Address

~~2323 CURLEW ROAD~~
~~SUITE 7E~~
~~DUNEDIN FL 34698~~
~~US~~

~~2323 CURLEW ROAD~~
~~SUITE 7E~~
~~DUNEDIN FL 34698~~
~~US~~

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

2. New Principal Office Address, If Applicable
16111 Ancroft Ct.

3. New Mailing Office Address, If Applicable
16111 Ancroft Ct.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
TAMPA, FL.

City & State
TAMPA, FL.

Zip
33647

Country
USA

Zip
33647

Country
USA

REINSTATEMENT

03-04

4. Date Incorporated or Qualified
To Do Business in Florida

01/12/1994

MRD

5. FEI Number

59-3218197

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

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

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
IP/D	GUERRERO-ARIAS, NESTOR M.D.	7740 MEDICAL CENTER	ZEPHYRHILLS FL
IP/D	FELD, HARVEY M.D.	7050 GALL BLVD	ZEPHYRHILLS FL 33541
TD	GUERRERO-ARIAS, NESTOR M.D.	37740 MERIDIAN AVE	DADE CITY FL 33525
AT/D	KNIGHT, Randolph M.D.	38022 Medical Center Ave.	ZEPHYRHILLS, FL. 33540
IS/D	LEON, Rafael M.D.	6712 Dairy Rd.	ZEPHYRHILLS, FL. 33542

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

~~JACOBSON, CHARLES~~
~~2323 CURLEW ROAD~~
~~SUITE 7E~~
~~DUNEDIN FL 34698~~

Name
FELD, Harvey J.
Street Address (P.O. Box Number is Not Acceptable)
16111 Ancroft CT.
Suite, Apt. #, Etc.
City
TAMPA
State
FL
Zip Code
33647

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Harvey J. Feld

REGISTERED AGENT MUST SIGN

Date

Sept 8, 2004

11. 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:

SIG Harvey J. Feld M.D.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(Interim Pres/Vice Pres)

Sept 8, 2004

Date

Daytime Phone #

(813)
972-3422

CR2E040 (7/03)

292

Pasco County IPA, Inc.
16111 Ancroft Court
Tampa, FL 33647
(813) 977-9953
September 8, 2004

Florida Dept. of State – Div. Of Corporations
Annual Reports / Reinstatement Section
P.O. Box 6327
Tallahassee, FL. 32314-6327

Dear Sirs:

Enclosed is an application for reinstatement which was recently forwarded to me.

I am kindly requesting that any reinstatement fees be waived as I have never received notice of previous annual reports (2003 or 2004), or fees due.

I have enclosed the proper fees for the annual reports for the preceeding two years. I have also made the necessary changes to the principle office address, new mailing address, Officers and registered agent.

The officers are as follows:

Feld, Harvey M.D. - Interim President and Vice Pres.

16111 Ancroft Ct., Tampa, FL. 33647

Guerrero-Arias, Nestor M., M.D. - Treasurer

37740 Meridian Ave., Dade City, FL 33525

Knight, Randolph, M.D. - Asst. Treasurer

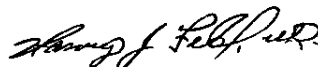
38022 Medical Center Ave, Zephyrhills, FL 33540

Leon, Rafael, M.D. - Interim Secretary

6712 Dairy Rd., Zephyrhills, FL. 33542

Thank you for your attention to this issue.

Sincerely,



Harvey J. Feld, M.D.
Interim Pres. And V.P.