

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

03 OCT 21 PM 1:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000003426

1. Corporation Name

Access One of Sarasota County, Inc.

REINSTATEMENT 03

2. Principal Office Address

636 Alhambra Road

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Venice, FL

City & State

Zip

34285

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

6/11/98

5. FEI Number

65-0842480

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

Joan Fridshal, CPA

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

Westland Consulting, Inc., 1219 East Avenue South

Suite, Apt. #, Etc.

Suite 104

City

Sarasota

State

FL

Zip Code

34239

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

Joan Fridshal
REGISTERED AGENT MUST SIGN

Date 10/16/03

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 | Patricia A. Sleight | 636 Alhambra Road | Venice, FL 34285 |
| V | Edward Eagen | 1125 South Lane | Englewood, FL 34224 |
| S | James Gianopoulos | 405 Rubens Drive | Nokomis, FL 34275 |
| T | Joan Fridshal | 5546 Modena Place | Sarasota, FL 34238 |
| | | | |
| | | | |

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

Joan Fridshal, Treas

10/16/03

Date

Daytime Phone #

CR2E081 (10/02)

10/16/03

Access One of Sarasota County, Inc.

636 Alhambra Rd.
Venice, FL 34285
(941) 330-9118
Fax (941) 362-4062

October 16, 2003

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

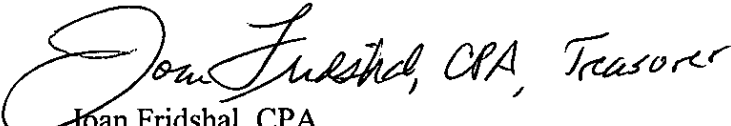
To Whom It May Concern:

Access One of Sarasota County, Inc., a 501(c)(3) nonprofit corporation, was late in submitting its Annual Report because the report was sent to an old address, and was not forwarded, but was returned to the Florida Department of State.

Hence, we are submitting the corporation reinstatement form with a check for \$61.25.
We understand that the reinstatement fee will be waived because of the circumstances.

Thank you

Sincerely,


Joan Fridshal, CPA
Treasurer