

**N98000005812**

**AUGUST 4, 2005**

**DEBIT MEMO ANNUAL REPORT  
DISSOLUTION NOTICE**

300058251273

**ANNUAL REPORT: RENAISSANCE  
HEALTHCARE AND SOCIAL REFORM, INC.**

**DEBIT MEMO: 54603-H**

**CHECK# 220**



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 5, 2005

RENAISSANCE HEALTHCARE AND SOCIAL REFORM, INC.  
3204 HASTIE ROAD  
TALLAHASSEE, FL 32310

SUBJECT: RENAISSANCE HEALTHCARE AND SOCIAL REFORM, INC.

Debit Memo #: 54603-H

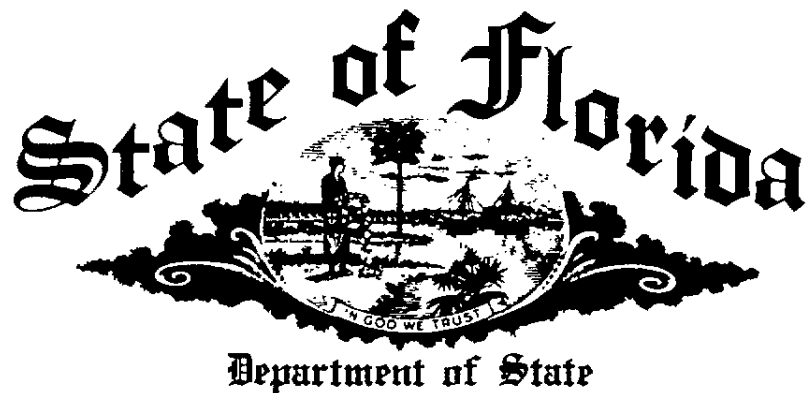
Document #: N98000005812

Due to your failure to respond to our letter advising you of your returned check and giving you 60 days notice of our intent to dissolve the above corporation, this corporation is now administratively dissolved.

A Certificate of Dissolution is enclosed.

Should you have any questions, please feel free to contact this office at (850) 245-6057.

Sincerely,  
Patricia Bailey  
Accountant II



### CERTIFICATE OF ADMINISTRATIVE DISSOLUTION

The provisions of section 607.1421 or 617.1421, Florida Statutes, which requires 60 days notice of a proposed dissolution, have been met for RENAISSANCE HEALTHCARE AND SOCIAL REFORM, INC., a corporation organized under the laws of the State of Florida. This corporation is hereby administratively dissolved as of August 4, 2005 for failure to file the required annual report(s), as required by law.

The document number of this corporation is N98000005812.



CR2EO22 (2-03)

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Fifth day of August, 2005

*Glenda E. Hood*  
Glenda E. Hood  
Secretary of State



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

April 12, 2005

RENAISSANCE HEALTHCARE AND SOCIAL REFORM, INC.  
3204 HASTIE ROAD  
TALLAHASSEE, FL 32310

SUBJECT: RENAISSANCE HEALTHCARE AND SOCIAL REFORM, INC.  
Ref. Number: N98000005812

Debit Memo #: 54603-H

This is to inform you that check #220 dated MARCH 2, 2005 in the amount of \$437.50 submitted with the annual report/uniform business report for RENAISSANCE HEALTHCARE AND SOCIAL REFORM, INC. has been returned by your bank because of NON-SUFFICIENT FUNDS.

We request you remit a cashier's check or money order, referencing the above named debit memo number, in the amount of \$459.38 made payable to the Department of State to cover the unpaid fees and service charge.

Section 607.1421 or 617.1421, Florida Statutes, requires at least 60 day notice of our intent to administratively dissolve or revoke your corporation for failure to file the annual report/uniform business report and pay the filing fee. Consider this your 60 day notice if the payment is not received, your corporation will be administratively dissolved or revoked on or after June 12, 2005 and a reinstatement fee of an additional \$600 will be imposed to reactivate the corporation.

Please send the replacement check to my attention at the address listed below.

If you have any questions concerning the filing of your document, please call (850) 245-6057.

Patricia Bailey  
Accountant II

Letter Number: 605A00024921

cc:IRP  
1501 E. PARK AVE.  
TALLAHASSEE, FL. 32301