

State of Florida Office of State Treasure Tallahassee, Florida

FOR OFFICIAL USE

DATE

NUMBER

02/24/2000

02719

DEBIT MEMORANDUM

00000015681

General Revenue Total Trust Total

Other Total

**Total** 

\$4,225.00

4,225.00

200003199812--1

Distribution

0.00

0.00

Cross	Samas Code	Reason	Amount
Ref 012 012 012 012 012 012 012 012 012 012	45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00	ACCOUNT CLOSED OTHER ACCOUNT CLOSED ACCOUNT CLOSED INSUFFICIENT FUNDS INSUFFICIENT FUNDS ACCOUNT CLOSED OTHER ACCOUNT CLOSED ACCOUNT CLOSED INSUFFICIENT FUNDS	43.75 50.00 61.25 61.25 78.75 78.75 150.00 150.00 150.00 150.00 158.75 375.00
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02719-1

The above named fund(s) has been reduced by the amount of this check(s) under the

Process Date: 02/14/2000

authority of Section 215.34, F.S.

State Treasurer

Order of Light francis of For ( Ser Part Parts 4923 AVERY RD. NEW PORT RICHEY, FL 34652 SUNSHINE TRANSPORTATION & WHEELCHAIR SERVICES OF FLORIDA, INC. Nations Cank NationsBank, N.A. "OD 50000" "CB3100277" DO3665B3840" Look for Micro Print signature line, red border and imagesate logo or back frank ACASH ITEM INSUFFICIENT LUNG/00 Vivuein y Corporations \$ 78,75 use V,''0000000 78 7 5." 63-27/631 FL 143

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--DEPT-OF-STATE 4500453 FOR DEPOSIT ONLY --02/08/00---01010---011 1009068796 \*\*\*\*\*78.75

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## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

March 2, 2000

Sunshine Transportation and Wheelchair Services of Florida, Inc. 4923 Avery Rd. New Port Richey, FL 34652

SUBJECT: SUNSHINE TRANSPORTATION AND WHEELCHAIR SERVICES OF FLORIDA, INCORPORATED Ref. Number: P00000015681

Debit Memo #: 02719-F

This is to inform you that your check #5000 dated February 7, 2000 in the amount of \$78.75 and submitted for SUNSHINE TRANSPORTATION AND WHEELCHAIR SERVICES OF FLORIDA, INCORPORATED has been returned to us by your bank because of Insufficient funds.

We request that you remit a cashier's check or money order in amount of \$93.75 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 900A00011659



## FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

April 7, 2000

Sunshine Transportation and Wheelchair Services of Florida Inc. 4923 Avery Rd. New Port, FL 34652

SUBJECT: SUNSHINE TRANSPORTATION AND WHEELCHAIR SERVICES

OF FLORIDA, INCORPORATED Ref. Number: P00000015681

Debit Memo #: 02719-F

Due to your failure to respond to our previous letter advising you of the returned check #5000, the Articles of Incorporation for SUNSHINE TRANSPORTATION AND WHEELCHAIR SERVICES OF FLORIDA, INCORPORATED have been cancelled and are considered not filed as of April 7, 2000.

The name of your corporation is now available for use.

If you have any questions concerning the returned check, please call (850) 487-6900.

Letter number: 000A00019114

Sincerely Melinda Lilliston Administrative Assistant II Division of Corporations