

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

05 JAN 24 PM 12:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT #** P00000094842

**1. Corporation Name**

PHILLIP H. TAYLOR, M.D., J.D., P.A.

**2. Principal Office Address**

200 CENTRAL AVE.

Suite, Apt. #, etc.

SUITE 710

City & State

ST. PETERSBURG, FL

Zip

33701

Country

**3. Mailing Office Address**

200 CENTRAL AVE.

Suite, Apt. #, etc.

SUITE 710

City & State

ST. PETERSBURG, FL

Zip

33701

Country

**REINSTATEMENT**

0105

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

10/9/00

**5. FEI Number**

59-3681860

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. TAYLOR

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

200 CENTRAL AVE.

Suite, Apt. #, Etc.

SUITE 710

City

ST. PETERSBURG

State

FL

Zip Code

33701

500045855555

02/02/05--01024--002 \*\*1358 75

**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 Taylor*

Phillip H. Taylor

Date 1/21/05

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
D/P	PHILLIP H. TAYLOR	200 CENTRAL AVE, STE 710	ST PETERSBURG, FL 33701
VP/S	TAMARA L. TAYLOR	200 CENTRAL AVE, STE 710	ST PETERSBURG, FL 33701

**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:**

*Phillip Taylor*

Phillip H. Taylor

Date

Daytime Phone #

1/21/05

CR2E081 (01/05)

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