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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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| SECRETARY DESTATE SECRETARY DESTATE SECRETARY DESTATE FALLAHASSEE. FLORIDA | REINSTATEMENT Secretary of State | | | | | , | | | |
| MENTAL HEALTH ASSOCIATES, INC. SECRETARY OF STATES | DOCUMENT # | | | | | 05 JUN 23 PM 1:11 | | | |
| 2. Princola Office Address 19 Suite Act Res. Suite 2-B Suite Act Res. Suite 2-B Suite Act Res. (same) 10 4 State 7-00 Shutmess in Februar 12/20/2000 10 4 State (same) 10 County 10 Same) 10 County 10 Same) 1 | | | | | | SECRETARY OF STATE | | | |
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| Pensacola , FL (same) | City & State | | City & State | | | 141 | _ | | |
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| To Name and Address of Current Registered Agent To Name and Address of Current Registered Agent To Name and Address of Current Registered Agent Name H. Frank Winn, Jr. Street Address in O Bus Number is Min Acceptable) 322 S. Allcaniz St. Sure, Aat F. Etc. Cry Pensacola B. Deng appointed the registered agent of the acove named corporation, and familiar with and accept the ordigations of acciden 607.0505 or 617.0503, F.S. 6/23/05 REGISTERED AGENT MUST SIGN 9. Names and Street Addresses of Each Officer andrer Director (Floras nonorofit corporations must tast at less 1) directors Titles Officer andrer Directors Officer andrer Directors Officer andrer Directors Officer andrer Directors 10.1 David Grady \$10.34 Sec. Carson C. Winn 3103-B East Blount St. Pensacola, FL 32503 Treas TOUDS6478997 06/23/05-01050-001 **220.00 EQUIDS647997 06/23/05-01050-001 **220.00 EQUIDS64799086 06/23/05-01050-001 **220.00 EQUIDS6479086 Officer andrer Directors of the Intercent of the Interce | | , | 1 - 7 | 1 1 | 6. | _ (| 0.75 Additional | Foo required | |
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| Pres. David Grady 29862 N. Tatum Blvd. Cave Creek, AZ 85253 Sec. Carson C. Winn 3103-B East Blount St. Pensacola, FL 32503 Freas. 700056478997 06/23/05-01050-001 ***220.00 10.1 sonity that I am an officer or director or the receiver or trustate ampowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling the reinstatement application, the reason for dissolution has been eliminated, the corporation name satisfies the requirements of section 607,0401 or 617 0401, F.S. I had all feed over this application is true and action have been paid and the names of incrediby this filling the composition have been paid and the names of incredibytable listed on this form do not qualify for an exemption under section 119,07(3)(0, F.S. The information indicated on this specification is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: Carson C. Winn 6/23/05 (850) 469-0128 | | | | | Jr. | Date6/23, | /05 | | |
| Pres. David Grady #1034 Cave Creek, AZ 85253 Sec. Carson C. Winn 3103-B East Blount St. Pensacola, FL 32503 Treas. 700056478997 86723705-01050-001 **220.00 10.1 confly that I am an officer of director or the receiver or trustae empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filling the reinstatement application, the reason for dissolution has been eliminated, the corporation manualisities the requirements of section 607.0401 or 617 0401, F.S. that all feest over the corporation have been paid and the names of individuals listed on this form ontol qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this samplication is true and accurate, and my signature shall have the same legal effect as if made under oath. SIGNATURE: Carson C. Winn 6/23/05 (850) 469-0128 | 9. Names and Str | eel Addresses of Each Officer a | nd/or Diractor (Florida no | noralit corporations must | hat at least 3 directors) | | | | |
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MENTAL HEALTH ASSOCIATES of PENSACOLA, INC. ZWS

14 West Jordan Street Suite 2-B Pensacola, Florida 32501 Phone: (850) 469-0128 Fax (850) 469-0132

June 23, 2005

PERSONAL & CONFIDENTIAL

Michelle Milligan
Florida Division of Corporations
Corporate filings
P.O. Box 6327
Tallahassee, FL 32314
FAX: (850) 245-6017

Re:

Mental Health Associates, Inc.

P00000117788 (Reinstatement and name change)

and

Mental Health Associates of Pensacola, Inc.

P05000039983 (Dissolution)

Dear Ms. Milligan:

Thank you for your advice and assistance in the matter. We are requesting reinstatement of Mental Health Associates, Inc., with change of name to Mental Health Associates of Pensacola, Inc.

We request reinstatement without penalty with waiver of reinstatement fees for the years of 2001 to 2005.

The corporation Mental Health Associates, Inc. (P00000117788) had been administratively dissolved. We believe that no notice of annual report due was received for 2001.

We have no intention of revoking the enclosed voluntary dissolution of the newly formed Mental Health Associates of Pensacola, Inc. (P05000039983), and release that name to the original corporation Mental Health Associates, Inc. (P00000117788).

As I understand the requirements, I enclose: \$220, as follows:

| Reinstatement of Mental Health | |
|------------------------------------|------------------|
| Associates, Inc. (P00000117788) | 750.00 |
| Articles of Amendment to change | |
| name (P00000117788) | 35.00 |
| Articles of Dissolution for Mental | |
| Health Associates of | |
| Pensacola (P05000039983) | 35.00 |
| | Total 820.00 |
| Less on deposit with your office | 60 <u>0.</u> 00 |
| | rce due \$220.00 |

3013

I further enclose:

For Mental Health Associates, Inc. (P00000117788)

- (1) Corporate Reinstatement document
- (2) Cover Letter and Articles of Amendment to change name.

For Mental Health Associates of Pensacola, Inc. (P05000039983)

(1) Cover Letter and Articles of Dissolution.

If anything else be required, please advise.

Very truly yours,

Carson C. Winn
Corporate Secretary

CCW/bwb Enclosures