

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

DIVISION OF CORPORATIONS

FILED

03 OCT 31 PM 3:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000028028

1. Corporation Name

TLC VISION ASSOCIATES OF FLORIDA, P.A.

Principal Place of Business

4830 W KENNEDY BLVD. STE 150
TAMPA FL 33609

Mailing Address

5280 SOLAR DR. STE 300
MISSISSAUGA, ONTARIO L4W 5M8

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

450 East Las Olas Blvd.

Suite, Apt. #, etc.

130

City & State

Ft. Lauderdale, FL

Zip

33301

Country

USA

3. New Mailing Office Address, If Applicable

540 Maryville Centre Dr.

Suite, Apt. #, etc.

200

City & State

St. Louis, MO

Zip

63141

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

03/19/2001

5. FEI Number

26-0054398

Applied For

Not Applicable

APPLIED FOR

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
D	CONCOOL, BARRY MD	986 CREAMERY RD	NEWTOWN PA 18940
Pres./ Treas.	Concool, Barry MD	986 Creamery Road	Newtown, PA 18940
Secretary/ General	Robert W. May	540 Maryville Centre Dr.	St. Louis, Mo 63141
Counsel			

501024337585
10/31/03--01080--011 **150.00

8. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S PINE ISLAND RD
PLANTATION FL 33324

9. Name and Address of New Registered Agent

Name

Same

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S. or 617.0505, F.S.

Signature of
Registered Agent

Date 10/28/03

REGISTERED AGENT MUST SIGN

11. 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

Robert W. May, Secretary 10/23/03 (314) 434-6900

Date

Daytime Phone #

CR2E040 (7/03)

TLC VisionSM

October 23, 2003

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

RE: TLC Vision Associates of Florida, P.A.

Dear Sir or Madam:

Please find enclosed an Application for Reinstatement for the above-referenced entity, along with our company's check in the amount of \$150.00. We respectfully request that the reinstatement fee be waived in this instance. Our company was involved in a merger in the year 2002. Subsequently, we did not receive the appropriate UBR Form or notice of pending dissolution. The Reinstatement Form did make its way to us and we have indicated the correct principal and mailing addresses on the enclosed form.

Thank you for your consideration. If you have any questions or require additional information, please do not hesitate to contact me.

Sincerely,


Robert W. May
Secretary and General Counsel

Enclosures

TLC Vision Corporation

U.S. Corporate Office: 540 Maryville Centre Drive • Suite 200 • St. Louis, Missouri 63141 • (314) 434-6900 • Fax (314) 434-2424
International Corporate Office: 5280 Solar Drive • Suite 300 • Mississauga, Ontario, Canada L4W 5M8 • (905) 602-2020 • Fax (905) 602-2025
www.tlcv.com

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MSS Midwest Surgical Services, Inc.

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the best