

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0142185 AT

DOCUMENT # P02000019805

1. Entity Name
BRIAN E. MCCARTHY DPM, PA



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 29 AM 8:00

Principal Place of Business
11341 CORTEZ BLVD.
BROOKSVILLE FL 34613

Mailing Address
11341 CORTEZ BLVD.
BROOKSVILLE FL 34613

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATEMENT

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

01-0592652

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCCARTHY, BRIAN E
11314 CORTEZ BLVD.
BROOKSVILLE FL 34613

Name

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

11341 CORTEZ BLVD

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

10/7/03

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
MCCARTHY, BRIAN E
11314 CORTEZ BLVD.
BROOKSVILLE FL 34613

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
300023753323
10/13/03--01080--004 **150.00

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ Change

☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/7/03

3525970049

Date

Daytime Phone #

CR2E034 (4/03)

DR. BRIAN E. McCARTHY

Podiatric Physician and Surgeon
11341 CORTEZ BLVD.
BROOKSVILLE, FLORIDA 34613
Telephone (352) 597-0049

October 23, 2003

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Corporation Reinstatement
Document #: PO2000019805

To Whom It May Concern,

I am writing this letter, as a second request, for a waiver of the penalty fees involved with reinstatement of my Florida for Profit Corporation. As was previously stated in a letter dated October 8, 2003, this is my first year in business under my corporate designation. Prior to this I operated my business under the form of a sole proprietorship. Please find enclosed a copy of the original letter.

On October 21, 2003, I called the Division of Corporations and spoke with Kathy. She informed me that I could request a review of the original penalty fees. I explained the situation and reason for my request. I was instructed to write another letter. In the face of decreased income and increased expenses, I would have great difficulty paying the assessed penalty.

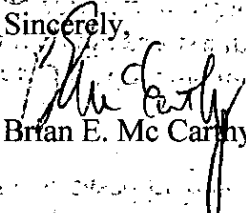
The reason for my request is that I did not receive the proper documentation due to mail errors. If requested I can obtain a sworn statement from the individual who did receive my mail and did not forward it promptly. This has been an ongoing problem for the complex in which my business is located.

I previously filled out the report with corrections and returned it to the appropriate address with a fee of \$150 as instructed by the Division of Corporations personnel. Also as instructed, I have sent this letter along to your attention requesting a waiver of this punitive fee. Enclosed is also a copy of the original documentation, which was returned to me

I am hopeful that this situation can be corrected quickly. I also hope you can understand how this unfortunate situation has occurred. Any assistance you could provide me would be greatly appreciated with respect to this situation.

Please feel free to contact me, at the above address during business hours, should problems or questions arise.

Sincerely,


Brian E. McCarthy, D.P.M.

DR. BRIAN E. McCARTHY

Podiatric Physician and Surgeon
11341 CORTEZ BLVD.
BROOKSVILLE, FLORIDA 34613
Telephone (352) 597-0049

Copy of
letter sent
10/8/03
(Signature)

Division of Corporations
Uniform Business Report Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Corporation Reinstatement
Document #: PO2000019805

To Whom It May Concern,

I am writing this letter to request a waiver the penalty fees involved with reinstatement of my Florida for Profit Corporation. This is my first year in business under my corporate designation. Prior to this I operated my business under the form of a sole proprietorship.

On September 26, 2003, I had a meeting with my accountant. He questioned me about my corporation registration filing. At that time, I had not received any correspondence from your office. I subsequently called the Division of Corporations and was instructed to pay a \$150 filing fee and request a waiver of the penalties due to the fact that 1) I had not received the forms and notification in the mail and 2) his being my first year in business I was not aware of the re-filing requirements. I was then instructed to 'go online' and get the appropriate forms. I attempted to do this however, the online website would not allow me to download the forms because the filing deadline had elapsed.

On October 6, 2003, I received some mail from a physician's office in which my mail was placed in their mailbox. I work in a condo medical complex and this particular physician had moved out of their office in August of 2003. It is not known how long this mail was in their possession. Included in the mail was Document # PO2000019805. This was my 2003 Uniform Business Report, which was due on September 10, 2003. Obviously I did not receive this mail until the 6th of October.

I immediately have filled out the report with corrections and returned it to the appropriate address with a fee of \$150 as instructed by the Division of Corporations personnel. Also as instructed, I have sent this letter along to your attention requesting a waiver of this punitive fee.

I am truly sorry for the circumstances, which have delayed my filing. I hope you can understand how this unfortunate situation has occurred. Any assistance you could provide me would be greatly appreciated with respect to this most unfortunate situation.

Please feel free to contact me, at the above address during business hours, should problems or questions arise.

Sincerely,

(Signature)
Brian E. Mc Carthy, D.P.M.