

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 DEC 30 PM 12:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # ~~PC000005749~~

1. Corporation Name
INNOVATIVE DIAGNOSTICS OF NORTHWEST FLORIDA, INC.

194000005840

Principal Place of Business
1218 Park Avenue
Orange Park, FL 32073

Mailing Address
1218 Park Avenue
Orange Park, FL 32073

REINSTATEMENT 95-96

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

DO NOT WRITE IN THIS SPACE

| | | | | | |
|--|---------|---------------------------------------|---------|---|--|
| 2. New Principal Office Address, If Applicable | | 3. New Mailing Address, If Applicable | | 4. Date Incorporated or Qualified To Do Business in Florida September 6, 1994 | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. FEI Number 59-3247064 | |
| City & State | | City & State | | Applied For Not Applicable | |
| Zip | Country | Zip | Country | 6. CERTIFICATE OF STATUS DESIRED <input checked="" type="checkbox"/> \$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) | | | |
|---|-------------------------------------|---|-----------------------|
| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4 City / State / Zip |
| P, T, S, D | Steven Warfield, D.C. | 1218 Park Avenue | Orange Park, FL 32073 |
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|---|--|--|--|
| 8. Name and Address of Current Registered Agent Steven Warfield, D.C. 1218 Park Avenue Orange Park, FL 32073 | | 9. Name and Address of New Registered Agent Name Steven Warfield, D.C. Street Address (P.O. Box Number is Not Acceptable) 1218 Park Avenue Suite, Apt. #, Etc. City Orange Park State FL Zip Code 32073 | |
|---|--|--|--|

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.

Signature of Registered Agent Steven Warfield Date 12/11/96

REGISTERED AGENT MUST SIGN

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☐ (See other side for information on intangible tax.)

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. 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., and that all fees owed by the corporation have been paid. 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: Steven Warfield SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Steven Warfield, D.C., President

Date 12/11/96 Daytime Phone # (904) 268-2434

CR2E40 (12/95)