

P97000097825

TRANSMITTAL LETTER

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

Subject: Dr. Barbara L. Schwartz, PA

Enclosed is an original and one (1) copy of the articles of incorporation and a check for:

—\$70.00	✓\$78.75	—\$122.50	—\$131.25
Filing Fee	Filing Fee & Certificate	Filing Fee & Certified Copy	Filing Fee, Certified Copy & Certificate

From: Dr. Barbara L. Schwartz, PA  
Barbara L. Schwartz, President  
6197 Half Moon Drive  
Port Orange, FL 32127

904-761-0377

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\*\*\*\*\*78.75 \*\*\*\*\*78.75

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

me 11/17/97



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

May 23, 1997

DR. BARBARA L. SCHWARTZ, PA  
6197 HALF MOON DRIVE  
PORT ORANGE, FL 32127

SUBJECT: DR. BARBARA L. SCHWARTZ, PA  
Ref. Number: W97000012189

We have received your document for DR. BARBARA L. SCHWARTZ, PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The specific nature of business of the professional association must be stated in the document.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation"); and the registered agent's signature.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6067.

Neysa Culligan  
Document Specialist

Letter Number: 497A00028196



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State

June 30, 1997

DR. BARBARA L. SCHWARTZ, PA  
6197 HALF MOON DRIVE  
PORT ORANGE, FL 32127

SUBJECT: DR. BARBARA L. SCHWARTZ, PA  
Ref. Number: W97000012189

We have received your document for DR. BARBARA L. SCHWARTZ, PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6067.

Neysa Culligan  
Document Specialist

Letter Number: 497A00028196



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

October 9, 1997

DR. BARBARA L. SCHWARTZ, PA  
6197 HALF MOON DRIVE  
PORT ORANGE, FL 32127

SUBJECT: DR. BARBARA L. SCHWARTZ, PA  
Ref. Number: W97000012189

We have received your document for DR. BARBARA L. SCHWARTZ, PA and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6067.

Neysa Culligan  
Document Specialist

Letter Number: 497A00028196

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Subject: Dr. Barbara L. Schwartz, PA

Article I: Name

The name of the corporation shall be: Dr. Barbara L. Schwartz,  
PA.

Article II: Principal Office

The principal place of business and mailing address of this  
corporation shall be: 6197 Half Moon Drive  
Daytona Beach, FL 32127

Article III: Shares

The number of shares that this corporation is authorized to  
have outstanding at any one time is: 1,000 shares of \$1.00 par  
value common stock.

Article IV: Initial Registered Agent and Street Address

The name and address of the initial registered agent is:  
Pamela J. Rockett, CPA  
1184 Pellicier Court  
Port Orange, FL 32119

Article V: Incorporators

The name and address of the incorporator to these Articles of  
Incorporation is:

Dr. Barbara L. Schwartz, President  
6197 Half Moon Drive  
Daytona Beach, FL 32127

Article VI: Nature of Business

The purpose and nature of this corporation will be to practice  
medicine.

*Barbara Schwartz, MD*  
*Oct 4th 1997*

**Pamela J. Rockett, CPA**  
**1184 Pellicier Court**  
**Port Orange, FL 32119**  
**(904) 760-0610**

June 19, 1997

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

Re: Dr. Barbara L. Schwartz, PA  
G97142000207

Dear Sirs;

I am hereby familiar with and accept the duties and responsibilities as registered agent for said corporation.

Sincerely,

  
Pamela J. Rockett, CPA

Document is being resubmitted November 11, 1997

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA