

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 JAN 12 PM 2:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000105880**

1. Corporation Name

SOUTHEASTERN MEDICAL ASSOCIATES, P.A.

Principal Place of Business

Mailing Address

1731 RIGGINS ROAD
SUITE 207
TALLAHASSEE FL 32308

1731 RIGGINS ROAD
SUITE 207
TALLAHASSEE FL 32308

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

2. New Principal Office Address, If Applicable
1690 Raymond Dietz Road

3. New Mailing Office Address, If Applicable
1690 Raymond Dietz Road

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Zip

Country

Country

USA

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/17/1997

5. FEI Number

59-3532050

Applied For

Not Applicable

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)

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	Karl F. Henkel, MD	1690 Raymond Dietz Road #C-1 TALLAHASSEE FL 32308	TALLAHASSEE FL 32308
V	BRANCE McCoy, MD	1690 Raymond Dietz Road #C-1 TALLAHASSEE FL 32308	TALLAHASSEE FL 32308
T	Cary F. Winchester, MD	1690 Raymond Dietz Road #C-1 TALLAHASSEE FL 32308	TALLAHASSEE FL 32308
S	CHARLES LONG, MD	1690 Raymond Dietz Road #C-1 TALLAHASSEE FL 32308	TALLAHASSEE FL 32308
S	LOUIS St. PETER, MD	1690 Raymond Dietz Road #C-1 TALLAHASSEE FL 32308	TALLAHASSEE FL 32308
S	William Kepner, MD	1690 Raymond Dietz Road #C-1 TALLAHASSEE FL 32308	TALLAHASSEE FL 32308

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

PIERCE, ROBERT A
227 SOUTH CALHOUN STREET
TALLAHASSEE FL 32301

Name

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

Suite, Apt. #, Etc.

City

State

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.

Signature of
Registered Agent

REQUIRED

Date 1/7/98

REGISTERED AGENT MUST SIGN

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information
on intangible tax.)

12. 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:

REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/99
Date

297-0114
Daytime Phone #

CR2040 (9/98)

December 30, 1998

Mr. David Mann
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

RE: **Southeastern Medical Associates, P.A.**
#P97000105880

Dear David: *David*

Once again it appears as though I am writing for your assistance with our annual reporting to the State regarding the above referenced corporation. Today I received notice that the corporation was dissolved for our failure to file the Annual Report.

After researching the circumstances, I have found that a check was processed and sent to the Division of Corporations on July 17 (check number 1374 in the amount of \$550.00). However, due to an administrative oversight, the Annual Report appears not to have been sent, and the check has subsequently not been cashed.

I respectfully request that you waive the late fees and reinstate the corporation effective with the receipt of this letter and the Application for Reinstatement attached. There has been no activity in this corporation for 1998, and any failure to file or pay on our part was completely unintentional.

Your kind consideration of this matter is greatly appreciated.

Very truly yours,

Steven T. Barnes

Steven T. Barnes
Administrator

*THS/
Hope you're
doing well!*