## 2005 FOR PROFIT CORPORATION REINSTATEMENT

•	1, 1,111,011	* · · · · · · · · · · · · · · · · · · ·						
DOCUMENT # P98000083045.  1. Entity Name PUTNAM CLINICAL LABORATORIES, INC.					FILED			
•	<u>) · · · ·                               </u>		<u> </u>		05 MAR 21 PM 12: 00			
Principal Place of Business Mailing Address								
700 ZEAGLER DRIVE SUITE 8		700 ZEAGLER DRIVE Suite 8			SECRETARY OF STATE (ALLAHASSEE, FLORIDA			
PALATKA, FL. 32177		PALATKA, FL 32177					#(100) JO PT1)	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03172005	REIN-P	CR2E098 (6/04)		
City & State		City & State	City & State		4. FEI Numbe 59-353		<del>- + ·</del>	oplied For at Applicable
Zip	Country	Zip	Country		5. Certificate	of Status Desired	S8.75 Add Fee Require	
	6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent			
HAYES, DENNIS E				Name				
2320 THE WOODS DR WEST JACKSONVILLE, FL 32246				Street Address (P.O. Box Number is Not Acceptable)				
				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								
FILE NOW!!! FEE IS \$300.00						in accordance v corporation did	with s. 607.193(2)(b), not receive the prior	F.S., the notice.
10.	OFFICERS AND DIRECTORS		11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTOR	S IN 11
TITLE NAME	PD Delete MADAN, ARLENE P		TITLE	l l	☐ Change ☐		☐ Addition	
STREET ADDRESS	1634 COLONIAL DRIVE		STRE	ET ADDRESS				
CITY-ST-ZIP			_	-ST-ZIP				<b>—</b> • • • • •
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CITY-ST-ZIP TITLE		☐ Defete	TITLE	-ST-ZIP			☐ Change	Addition
NAME		Detete	NAM	l	90	100499		[_] Addition
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NAME		<b>2</b> 55.00	NAM	l l	o a stronger et s	ल्क्स्ट्रेस हो। सा स्टब्स्ट्रेस ही। संबंधित स्टब्स्ट्रेस सा स्टब्स्ट्रेस स्टब्स्ट्रेस स्टब्स्ट्रेस स्टब्स्ट्रेस	= NU_A	5
STREET ADDRESS CITY-ST-ZIP				ET ADDRESS   ST-ZIP		6666	010	లు గ
TITLE		☐ Delete	TITLE				☐ Change	Addition
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CITY-ST-ZIP				ST-ZIP				
TITLE		☐ Delete	TITLE	I			☐ Change	☐ Addition
NAME STREET ADDRESS			NAMI STRE	E Et address				
CITY-ST-ZIP				-ST-ZIP				
12. I hereby of indicated	certify that the information supplied wit on this report or supplemental report	h this filing does not qualify for strue and accurate and that	r the exer	mption stated in Se	ection 119.07(3)(	i), Florida Statutes.	I further certify that the i	nformation

of the corporation or the receiver of 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.

## - Hayes & Associates, P.A.

Attorneys and Counselors at Law

2320 The Woods Drive, West Jacksonville, Florida 32246-1167

E-mail address: hayeslaw@comcast.net

Dennis E. Hayes

Admitted to Florida and Georgia Bars

Telephone: (904) 220-3565 Facsimile: (904) 220-7080

March 17, 2005

Division of Corporations Reinstatement Section P. O. Box 6327 Tallahassee, Florida 32314-6327

Re: Reinstatement of Putnam Clinical Laboratories, Inc.

Document Number: P98000083045

## Gentlemen:

Enclosed you will find an executed 2005 For Profit Corporation Reinstatement for Putnam Clinical Laboratories, Inc. along with a check in the amount of \$300.00 made payable to the Florida Department of State to cover the related filing fee to reinstate this corporation as an active Florida corporation in good standing.

If you need any additional information in connection with the filing of the enclosed 2005 for Profit Corporation Reinstatement of this corporation, please give me a call.

Suicerery,

Jennis E. Hayes

DEH:nb Enclosures

Arlene P. Madan w/enclosures