

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

02 APR 17 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

583253

Warren Ross Federgreen, M.D., Inc.

2. Principal Office Address

2328 Ginger Terrace

Suite, Apt. #, etc.

City & State

Jensen Beach, FL

Zip

Country

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

REINSTATEMENT 01-02

4. Date Incorporated or Qualified
To Do Business in Florida

9-27-91

5. FEI Number

65-0166188

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Warren Federgreen

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

2328 Ginger Terrace

Suite, Apt. #, Etc.

City

Jensen Beach

State
FL

Zip Code
34957

300005394638--8

04/30/02-01066--025

***1050.00 ***1050.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Dir	Warren Federgreen	2328 Ginger Terrace	Jensen Beach, FL 34957
President			
Secy	Susan Federgreen	2328 Ginger Terrace	Jensen Beach, FL 34957
Treasurer			

10. 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Director's Consent To Corporate Action

The undersigned, being the Director of WARREN ROSS FEDERGREEN, M.D., INC., do hereby consent to, and hereby take the following corporate action and adopt the following Resolutions hereinafter set forth.

RESOLVED, that the Corporation shall be reinstated in the State of Florida, and the President is authorized and empowered to execute any and all necessary documents, reports, returns to effectuate the same;

RESOLVED FURTHER, that the principal address of the Corporation shall be reflected upon said documents and filings as 2328 Ginger Terrace, Jensen Beach, Florida 34957, to be consistent with the actual current situation;

RESOLVED FURTHER, that the name and address of the Registered Agent for the Corporation shall be changed to WARREN ROSS FEDERGREEN, located at 2328 Ginger Terrace, Jensen Beach, Florida 34957.

DATED this 15th day of April, 2002.



WARREN ROSS FEDERGREEN
Director