2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000171667

Entity Name: NATIONWIDE UMATILLA CENTER, INC.

FILED Apr 13, 2006 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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100 N. LASALLE 939 LONGDALE AVENUE SUITE 1111 LONGWOOD, FL 32750 CHICAGO, IL 60602

Current Mailing Address: New Mailing Address:

100 N. LASALLE 939 LONGDALE AVENUE SUITE 1111 LONGWOOD, FL 32750 CHICAGO, IL 60602

FEI Number: 20-2055148 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HENKHAUS, BARBARA 939 LONGDALE AVENUE LONGWOOD, FL 32750 US

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.

SIGNATURE: BARBARA HENKHAUS

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

 Name:
 BALIN, TIMOTHY T
 Name:
 BALIN, TIMOTHY T

 Address:
 100 N. LASALLE STREET, SUITE 1111
 Address:
 939 LONGDALE AVENUE

 City-St-Zip:
 CHICAGO, IL 60602
 City-St-Zip:
 LONGWOOD, FL 32750

Title: SEC () Delete Title: SEC (X) Change () Addition

 Name:
 SMITH, JONATHAN L
 Name:
 SMITH, JONATHAN L

 Address:
 100 N. LASALLE, SUITE 1111
 Address:
 939 LONGDALE AVENUE

 City-St-Zip:
 CHICAGO, IL 60602
 City-St-Zip:
 LONGWOOD, FL 32750

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY T. BALIN P 04/13/2006