2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P05000109214

FILED Oct 15, 2009 Secretary of State

Entity Name: NICHOLS AND ASSOCIATES PHYSICAL THERAPY SPECIALISTS, INC.

Current Principal Place of Business: New Principal Place of Business:

7030 B THOMAS DR 7328 G THOMAS DR

PANAMA CITY BEACH, FL 32408 PANAMA CITY BEACH, FL 32408

Current Mailing Address: New Mailing Address:

7030 B THOMAS DR 7328 G THOMAS DR

PANAMA CITY BEACH, FL 32408 PANAMA CITY BEACH, FL 32408

FEI Number: 20-3247475 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:

GAGLIO, NANCY J 901 GRACE AVE

PANAMA CITY, FL 32401 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: NANCY GAGLIO

Electronic Signature of Registered Agent Date

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notic Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 NICHOLS, DONNA
 Name:
 NICHOLS, DONNA

 Address:
 3717 MARINERS DR
 Address:
 210 SUMMERWOOD DRIVE

 City-St-Zip:
 PANAMA CITY BEACH, FL 32408
 City-St-Zip:
 PANAMA CITY BEACH, FL 32413

I hereby certify that the information supplied with this filing does not qualify 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: DONNA SOAVE NICHOLS DSN 10/15/2009