

2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 525883

FILED
Dec 16, 2008
Secretary of State

Entity Name: CAPE CORAL MEDICINE CHEST, INC.

Current Principal Place of Business:

1633 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904

New Principal Place of Business:

1633 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904 US

Current Mailing Address:

14300 RIVA DEL LAGO DR
FORT MYERS, FL 33907

New Mailing Address:

14300 RIVA DEL LAGO DR
UNIT 1201N
FORT MYERS, FL 33907 US

FEI Number: 59-1723401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL, STANLEY
1633 CAPE CORAL PARKWAY
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

SPIEGEL, STANLEY
14300 RIVA DEL LAGO DR
UNIT 1201N
FORT MYERS, FL 33907 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: STANLEY SPIEGEL

12/16/2008

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:

Title: PD () Delete
Name: SPIEGEL, STANLEY,
Address: 14300 RIVA DEL LAGO DR
City-St-Zip: FORT MYERS, FL 33907

Title: SD () Delete
Name: SPIEGEL, JUDITH,
Address: 14300 RIVA DEL LAGO DR
City-St-Zip: FORT MYERS, FL 33907

Title: VD (X) Delete
Name: BERG, GERTRUDE,
Address: 14300 RIVA DEL LAGO DR
City-St-Zip: FORT MYERS, FL 33907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SPIEGEL, STANLEY
Address: 14300 RIVA DEL LAGO DR, UNIT 1201N
City-St-Zip: FORT MYERS, FL 33907 US

Title: STD (X) Change () Addition
Name: SPIEGEL, JUDITH
Address: 14300 RIVA DEL LAGO DR, UNIT 1201N
City-St-Zip: FORT MYERS, FL 33907 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STANLEY SPIEGEL

PD

12/16/2008

Electronic Signature of Signing Officer or Director

Date