2014 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 04, 2014
Secretary of State

DOCUMENT# 593739

Entity Name: C.N. GUERRIERE M.D., P.A.

Current Principal Place of Business:

3333 W BEARSS AVE
TAMPA, FL 33618 US

New Principal Place of Business:

14502 N DALE MABRY HWY
SUITE 200
TAMPA, FL 33618 US

Current Mailing Address:

3333 W BEARSS AVE
TAMPA, FL 33618 US

New Mailing Address:

14502 N DALE MABRY HWY
SUITE 200
TAMPA, FL 33618 US

FEI Number: 59-1904695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GUERRIERE, CILIO N
3333 W. BEARSS AVE.
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

GUERRIERE, CILIO N
14502 N DALE MABRY HWY.
SUITE 200
TAMPA, FL 33618 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: CILIO N GUERRIERE MD 04/04/2014
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD
Name: GUERRIERE, CILIO N
Address: 14502 N DALE MABRY HWY SUITE 200
City-St-Zip: TAMPA, FL 33618 US

Title: V
Name: GUERRIERE, CAROL A
Address: 14502 N DALE MABRY HWY SUITE 200
City-St-Zip: TAMPA, FL

I hereby 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 all other like empowered.

SIGNATURE: CILIO N GUERRIERE MD PD 04/04/2014
Electronic Signature of Signing Officer or Director Date