2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 11, 2004
Secretary of State

DOCUMENT# 600677

Entity Name: WITTEN & WITTEN, P.A.

Current Principal Place of Business:

223 W. ADAMS STREET
JACKSONVILLE, FL 32202

New Principal Place of Business:

Current Mailing Address:

8853 SAN JOSE BLVD
JACKSONVILLE, FL 32217 US

New Mailing Address:

223 WEST ADAMS STREET
JACKSONVILLE, FL 32202 US

FEI Number: 59-1225912 **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:

WITTEN, PAUL J
223 WEST ADAMS STREET
JACKSONVILLE, FL 32202 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: PAUL J WITTEN D.M.D 10/11/2004
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: PDS ( ) Delete
Name: WITTEN,PAUL J., D.M., D.
Address: 223 W.ADAMS STREET
City-St-Zip: JACKSONVILLE, FL 32202

Title: VAS ( ) Delete
Name: WITTEN, ANDREW, L,
Address: 223 W ADAMS ST
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PAUL J WITTEN, D.M.D PDS 10/11/2004
Electronic Signature of Signing Officer or Director Date