

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 604728

**FILED
Oct 03, 2014
Secretary of State**

Entity Name: GAINESVILLE GYNECOLOGY GROUP, M.D., P.A.

Current Principal Place of Business:

6730 NW 11TH PL
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

6730 NW 11TH PL
GAINESVILLE, FL 32605

New Mailing Address:

FEI Number: 59-1489405 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JENNIFER LYNN ALDERMAN, MD
6730 NW 11TH PL
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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: JENNIFER LYNN ALDERMAN, MD

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: ROSS, KELLI C MD
Address: 6730 NW 11TH PL
City-St-Zip: GAINESVILLE, FL 32605

Title: TD
Name: ALDERMAN, JENNIFER L DR
Address: 6730 NW 11TH PL
City-St-Zip: GAINESVILLE, FL 32605

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: JENNIFER LYNN ALDERMAN

Electronic Signature of Signing Officer or Director

DR

10/03/2014

Date