## 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT#733156** 

Entity Name: DR. ELLA PIPER CENTER, INC.

FILED Sep 30, 2007 Secretary of State

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

1971 FRENCH ST 3409 DR. MLK BLVD.

FT. MYERS, FL 33916 US FT. MYERS, FL 33916 US

Current Mailing Address: New Mailing Address:

1971 FRENCH ST 3409 DR. MLK BLVD.

FT. MYERS, FL 33916 US FT. MYERS, FL 33916 US

FEI Number: 59-1634230 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BATTLE, WILLIE
1971 FRENCH ST
BATTLE, WILLIE
3409 DR.MLK BLVD.

FT. MYERS, FL 33916 US FT. MYERS, FL 33916 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: WILLIE BATTLE 09/30/2007

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D ( ) Delete Title: D (X) Change ( ) Addition Name: BATTLE, JOSEPH Name: BATTLE, JOSEPH

Address: 1971 FRENCH ST Address: 3409 DR.MLK BLVD.

City-St-Zip: FT. MYERS, FL 33916 US City-St-Zip: FT. MYERS, FL 33916 US

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: BATTLE, WILLIE Name: BATTLE, WILLIE

 Address:
 1971 FRENCH ST
 Address:
 3409 DR.MLK BLVD.

 City-St-Zip:
 FT. MYERS, FL 33916 US
 City-St-Zip:
 FT. MYERS, FL 33916 US

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$ 

 Name:
 MUHAMMAD, WILL
 Name:
 MUHAMMAD, WILL

 Address:
 1971 FRENCH ST
 Address:
 3409 DR. MLK BLVD.

 City-St-Zip:
 FT. MYERS, FL 33916 US
 City-St-Zip:
 FT. MYERS, FL 33916 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIE J. BATTLE PRES 09/30/2007