

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F03000003605

**FILED**  
**Mar 25, 2009**  
**Secretary of State**

**Entity Name:** PRACTITIONER SERVICES OF BREVARD, INCORPORATED

**Current Principal Place of Business:**

112 BARNACLE PLACE  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 560857  
ROCKLEDGE, FL 329560857

**New Mailing Address:**

**FEI Number:** 57-1176101

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CHANDLER, JOHN T  
112 BARNACLE PLACE  
ROCKLEDGE, FL 32955 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:** JOHN T. CHANDLER

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** CPS ( ) Delete  
**Name:** ANDERSON, URSULA K  
**Address:** 112 BARNACLE PLACE  
**City-St-Zip:** ROCKLEDGE, FL 32955

**Title:** VCVP ( ) Delete  
**Name:** CHANDLER, JOHN T  
**Address:** 112 BARNACLE PLACE  
**City-St-Zip:** ROCKLEDGE, FL 32955

**Title:** D ( ) Delete  
**Name:** CHANDLER, J. MARK  
**Address:** 112 BARNACLE PLACE  
**City-St-Zip:** ROCKLEDGE, FL 32955

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

**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 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:** JOHN T. CHANDLER

VP

03/25/2009

Electronic Signature of Signing Officer or Director

Date