

# 2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F22310

FILED  
Mar 22, 2012  
Secretary of State

**Entity Name:** STEPHEN R. GELLER, M.D., F.A.C.S., P.A.

**Current Principal Place of Business:**

3000 UNIVERSITY DRIVE , SUITE G  
% STEPHEN R. GELLER  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

3000 UNIVERSITY DRIVE , SUITE G  
% STEPHEN R. GELLER  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 59-1913663

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GELLER, STEPHEN R.  
3000 UNIVERSITY DRIVE , SUITE G  
CORAL SPRINGS, FL 33065 US

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

GELLER, STEPHEN  
3000 UNIVERSITY DRIVE , SUITE G  
CORAL SPRINGS, FL 33065 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: STEPHEN GELLER

03/22/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GELLER, STEPHEN R.  
Address: 3000 UNIVERSITY DR., #G  
City-St-Zip: CORAL SPRINGS, FL

Title: SD  
Name: GELLER, BARBARA  
Address: 3000 UNIVERSITY DR., #G  
City-St-Zip: CORAL SPRINGS, 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: STEPHEN GELLER

PRES

03/22/2012

Electronic Signature of Signing Officer or Director

Date