

# 2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F98000000386

Entity Name: CORA HEALTH SERVICES, INC.

FILED  
Oct 19, 2009  
Secretary of State

## Current Principal Place of Business:

1110 SHAWNEE RD.  
LIMA, OH 45805

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 150  
LIMA, OH 45802

## New Mailing Address:

P.O. BOX 150  
LIMA, OH 45802

FEI Number: 34-1853567

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

YADLEY, GREGORY C ESQ.  
101 EAST KENNEDY BLVD., #2800  
TAMPA, FL 33602 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: GREGORY YADLEY

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: CD ( ) Delete  
Name: BORRA, PIER C  
Address: 1110 SHAWNEE RD  
City-St-Zip: LIMA, OH 45802

Title: P ( ) Delete  
Name: SMITH, DENNIS R  
Address: 1110 SHAWNEE RD.  
City-St-Zip: LIMA, OH 45805

Title: V ( ) Delete  
Name: ROUSH, BRAD C  
Address: 1110 SHAWNEE ROAD  
City-St-Zip: LIMA, OH 45802

Title: SVPB ( ) Delete  
Name: BRIAN, BARTH L  
Address: 1110 SHAWNEE ROAD  
City-St-Zip: LIMA, OH 45805

Title: VPI ( ) Delete  
Name: MOODY, RAYMOND J  
Address: 1110 SHAWNEE RD  
City-St-Zip: LIMA, OH 45805

Title: V (X) Delete  
Name: BAIR, ROBERT J  
Address: 1110 SHAWNEE ROAD  
City-St-Zip: LIMA, OH 45805

## 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:

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

Title: SVPO (X) Change ( ) Addition  
Name: JUSTIN, BORRA A  
Address: 1110 SHAWNEE RD  
City-St-Zip: LIMA, OH 45805

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: BRAD C ROUSH

V

10/19/2009

Electronic Signature of Signing Officer or Director

Date