2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 10, 2007
Secretary of State

DOCUMENT# G61540

Entity Name: COOPER & COOPER MEDICAL DEVELOPERS INCORPORATED

Current Principal Place of Business:

4050 SW 42 AVE.
PALM CITY, FL 34990 US

New Principal Place of Business:

3842 SW 42 AVE.
PALM CITY, FL 34990 US

Current Mailing Address:

4050 SW 42 AVE
PALM CITY, FL 34990 US

New Mailing Address:

3842 SW 42 AVE
PALM CITY, FL 34990 US

FEI Number: 59-2341452 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COOPER, DONALD G
4050 SW 42 AVE.
PALM CITY, FL 34990 US

Name and Address of New Registered Agent:

COOPER, DONALD G
3842 SW 42 AVE.
PALM CITY, FL 34990 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: DONALD G COOPER 10/10/2007
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: VP ( ) Delete
Name: COOPER, ELLEN C
Address: 4050 SW 42 AVE.
City-St-Zip: PALM CITY, FL 34990

Title: PD ( ) Delete
Name: COOPER, DONALD G.,
Address: 4050 42 ND AVENUE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: COOPER, ELLEN C
Address: 3842 SW 42 AVE.
City-St-Zip: PALM CITY, FL 34990

Title: PD (X) Change ( ) Addition
Name: COOPER, DONALD G.,
Address: 3842 42 ND AVENUE
City-St-Zip: PALM CITY, FL 34990

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: ELLEN C COOPER VP 10/10/2007
Electronic Signature of Signing Officer or Director Date