

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# H57184

FILED  
Dec 06, 2007  
Secretary of State

Entity Name: DETURE STONE ASSOCIATES, P.A.

## Current Principal Place of Business:

C/O DAVID J VAUGHAN JR MD  
1812 NORTH MILLS AVENUE  
ORLANDO, FL 32803 US

## New Principal Place of Business:

## Current Mailing Address:

C/O DAVID J VAUGHAN JR MD  
1812 NORTH MILLS AVENUE  
ORLANDO, FL 32803 US

## New Mailing Address:

FEI Number: 59-2558465

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KLAINMAN, ALLAN P  
1812 NORTH MILLS AVE  
ORLANDO, FL 32803 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: ALLAN P KLAIMAN

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: RIVERA, INOEL  
Address: 1812 N MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

Title: D ( ) Delete  
Name: THILL, JEFFREY R  
Address: 1812 NORTH MILLS AVENUE  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: JABLONSKI, DAVID H  
Address: 1812 NORTH MILLS AVENUE  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: GUNDIAN, JULIO  
Address: 1812 NORTH MILES AVENUE  
City-St-Zip: ORLANDO, FL

Title: PD ( ) Delete  
Name: KLAIMAN, ALLAN  
Address: 1812 NORTH MILLS AVENUE  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: BRADY, JEFFREY  
Address: 1812 NORTH MILLS AVE  
City-St-Zip: ORLANDO, FL 32803

## 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: ( ) 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: WILLIAM F HARRIGER

CEO

12/06/2007

Electronic Signature of Signing Officer or Director

Date