## 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# J24823

Entity Name: AUDIOLOGY AND SPEECH PATHOLOGY, INC.

FILED Oct 24, 2008 Secretary of State

Current Principal Place of Business:

% MANLEY P. CALDWELL, JR. 3540 FOREST HILL BLVD.,#205 W.PALM BCH., FL 33406

Current Mailing Address:

% MANLEY P. CALDWELL, JR.

3540 FOREST HILL BLVD.,#205 W.PALM BCH., FL 33406

FEI Number: 59-2692324

FEI Number Applied For ( )

FEI Number Not Applicable ( )

( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

New Principal Place of Business:

% MANLEY P. CALDWELL, JR.

3540 FOREST HILL BLVD.,#205

WEST PALM BEACH, FL 33406

% MANLEY P. CALDWELL, JR. 3540 FOREST HILL BLVD.,#205

WEST PALM BEACH, FL 33406

New Mailing Address:

CALDWELL, MANLEY P., JR. 324 ROYAL PALM WAY PALM BEACH, FL 33480 U

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: MANLEY P. CALDWELL, JR.

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: DR. ( ) Delete

Name: GRANT, MELVIN L.,
Address: 12720 HEAD WATER CIRCLE
City-St-Zip: WELLINGTON, FL 33414

Title: MRS. ( ) Delete Name: WENDY, GRANT

Address: 12720 HEADWATER CIRCLE
City-St-Zip: WELLINGOTN, FL 33414

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR. (X) Change ( ) Addition

Name: GRANT, MELVIN L.,

Address: 12720 HEADWATER CIRCLE City-St-Zip: WELLINGTON, FL 33414

Title: MRS. (X) Change ( ) Addition

Name: WENDY, GRANT

Address: 12720 HEADWATER CIRCLE City-St-Zip: WELLINGTON, FL 33414

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: MELVIN L. GRANT DR. 10/24/2008