

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# K21016

**Entity Name:** R.L. WESTBERRY, PH.D., PA

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

3111 N. UNIVERSITY DR  
#400  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

2855 N. UNIVERSITY DR.  
#500  
CORAL SPRINGS, FL 33065

**Current Mailing Address:**

3111 N. UNIVERSITY DR  
#400  
CORAL SPRINGS, FL 33065 US

**New Mailing Address:**

2855 N. UNIVERSITY DR.  
#500  
CORAL SPRINGS, FL 33065

FEI Number: 65-0039807

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WESTBERRY, R. L.  
3111 N. UNIVERSITY DR  
#400  
CORAL SPRINGS, FL 33065 US

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

WESTBERRY, R. L.  
2855 N. UNIVERSITY DR.  
#500  
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: WESTBERRY, R. L.

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WESTBERRY, RICHARD L.  
Address: 12671 NW 14TH PLACE  
City-St-Zip: FORT LAUDERDALE, FL 33323

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: R. L. WESTBERRY, PH.D., P.A.

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date