

NO400008167

(Requestor's Name)



Florida Patient Safety Corporation  
2722 Waterford Glen Court  
Tallahassee, FL 32312

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 13, 2009

FLORIDA PATIENT SAFETY CORP.  
2722 WATERFORD GLEN COURT  
TALL., FL 32312

SUBJECT: FLORIDA PATIENT SAFETY CORPORATION  
Ref. Number: N04000008167

We have received your document for FLORIDA PATIENT SAFETY CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Registered Agent may have only ONE registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain  
Regulatory Specialist II

Letter Number: 709A00023852

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TALLAHASSEE, FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: FLORIDA PATIENT SAFETY CORPORATION  
2. The principal office address: 2722 WATERFORD GLEN COURT  
TALLAHASSEE, FL 32312  
3. The mailing address (if different): N/A

4. Date of incorporation/qualification: 8.20.04 Document number: N04000008167

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

RESIGNATION ENCLOSED

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TALLAHASSEE, FLORIDA

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ANTHONY J. SILVAGNI, D.O.  
ROOM 1407 TERRY BUILDING  
3200 SOUTH UNIVERSITY DRIVE  
FT. LAUDERDALE, FL 33328

NEW  
106 E. COLLEGE AVE.  
SUITE 1200  
TALLAHASSEE FL  
32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical. ARE AS INDICATED ABOVE

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Anthony J. Silvagni, D.O.  
Signature of an officer or director

ANTHONY J. SILVAGNI, CHAIR  
Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Anthony J. Silvagni, D.O.  
Signature of Registered Agent

6/26/2009  
Date

If signing on behalf of an entity:

ANTHONY J. SILVAGNI, CHAIR  
Typed or Printed Name

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)