

# 2013 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N04000010790

FILED  
Mar 18, 2013  
Secretary of State

**Entity Name:** NATIONAL ALLIANCE OF MEDICARE SET-ASIDE PROFESSIONALS, INC.

**Current Principal Place of Business:**

341 N. MAITLAND AVENUE  
SUITE 130  
MAITLAND, FL 32751

**New Principal Place of Business:**

310 W. LAKE STREET  
SUITE 111  
ELMHURST, IL 60126

**Current Mailing Address:**

341 N. MAITLAND AVENUE  
SUITE 130  
MAITLAND, FL 32751

**New Mailing Address:**

310 W. LAKE STREET  
SUITE 111  
ELMHURST, IL 60126

**FEI Number:** 20-2112607

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

PYSTER, PHIL  
341 N. MAITLAND AVE.  
SUITE 130  
MAITLAND, FL 32751 US

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

PFEIFLE, DEBORAH  
101 RIVERFRONT BOULEVARD  
SUITE 100  
BRADENTON, FL 34205 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: DEBORAH PFEIFLE

03/18/2013

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: MR  
Name: SHAW, DOUGLAS VP  
Address: 2100 N. ALAFAYA TRAIL, SUITE 201  
City-St-Zip: OVIEDO, FL 32765 US

Title: MR  
Name: POPOLIZIO, MARK BMEMBER  
Address: 400 RIVERPARK DRIVE, SUITE 400  
City-St-Zip: NORTH READING, MA 01864 US

Title: MR.  
Name: MICHAEL, WESTCOTT PRES.  
Address: 1312 SHERWOOD CIRCLE  
City-St-Zip: WAUSAU, WI 54403 US

Title: MS  
Name: PROVENZANO, FRAN BRD MBR  
Address: PO BOX 1487  
City-St-Zip: OLDSMAR, FL 34677

Title: MS  
Name: PFEIFLE, DEBORAH SEC.  
Address: 101 RIVERFRONT BLVD, SUITE 100  
City-St-Zip: BRADENTON, FL 34205 US

Title: MR  
Name: KORCH, DAVID L TREASUR  
Address: 49 FLINT RIDGE DRIVE  
City-St-Zip: SHILLINGTON, PA 19607

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL WESTCOTT

PRES

03/18/2013

Electronic Signature of Signing Officer or Director

Date