

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000011951

FILED
Nov 03, 2008
Secretary of State

Entity Name: THE BICOL CLINIC FOUNDATION, INC.

Current Principal Place of Business:

951 NW 13TH STREET SUITE 3E
BOCA RATON, FL 33486

New Principal Place of Business:

Current Mailing Address:

951 NW 13TH STREET SUITE 3E
BOCA RATON, FL 33486

New Mailing Address:

FEI Number: 14-1948962 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: LAWRENCE J SPIEGEL PRESIDENT

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SCHUSTER, JOSHUA A
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: SCHUSTER, JENNIFER
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: COHAN, ROBERT
Address: 760 MARA DRIVE
City-St-Zip: BLUE BELL, PA 19422

Title: P () Delete
Name: SCHUSTER, MITCHELL A
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: S () Delete
Name: SCHUSTER, JENNIFER
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: D () Delete
Name: CLAIR, ROBERT
Address: 4940 SOUTH OCEAN BLVD APT 1601
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: SCHUSTER, JOSHUA A
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: SECT (X) Change () Addition
Name: GOULD, GARY
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: VP (X) Change () Addition
Name: COHAN, ROBERT
Address: 760 MARA DRIVE
City-St-Zip: BLUE BELL, PA 19422

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TREA (X) Change () Addition
Name: SITRICK, JOSEPH
Address: 951 NW 13TH STREET SUITE 3E
City-St-Zip: BOCA RATON, FL 33486

Title: VP (X) Change () Addition
Name: CLAIR, ROBERT
Address: 4940 SOUTH OCEAN BLVD APT 1601
City-St-Zip: HIGHLAND BEACH, FL 33487

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

SIGNATURE: MITCHELL A SCHUSTER

PRES

11/03/2008

Electronic Signature of Signing Officer or Director

Date