

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N07000004791

FILED  
Nov 04, 2009  
Secretary of State

**Entity Name:** PALM BEACH CENTER OF HEALTH, INC.

**Current Principal Place of Business:**

1071 W 3RD STREET  
RIVERA BEACH, FL 33404

**New Principal Place of Business:**

1715 DIVISION AVE  
WEST PALM BEACH, FL 33407

**Current Mailing Address:**

1071 W 3RD STREET  
RIVERA BEACH, FL 33404

**New Mailing Address:**

352 GARDEN BLVD  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 26-0364969 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

THOMAS, CERETHA M  
1071 W 3RD STREET  
RIVERA BEACH, FL 33404 US

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

THOMAS, CERETHA M ARNP  
1071 W 3RD STREET  
RIVERA BEACH, FL 33404 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: CERETHA THOMAS MARSHALL

11/04/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: DAWKINS, SHANDRA  
Address: 4898 B ORLEANS COURT  
City-St-Zip: WEST PALM BEACH, FL 33415

Title: DS ( ) Delete  
Name: POWELL, JR., JAMES  
Address: 801 W 1ST STREET  
City-St-Zip: RIVERA BEACH, FL 33404

Title: D ( ) Delete  
Name: LEONARD, CORINE  
Address: 2101 AVENUE F APT 202  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: DVP ( ) Delete  
Name: WAGLEY, JANE  
Address: 2084 RADNOR ROAD  
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: DT ( ) Delete  
Name: SPISAK, PATTI  
Address: 5254 HORSESHOE POINT ROAD  
City-St-Zip: STUART, FL 34997

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: DT (X) Change ( ) Addition  
Name: SPISAK, PATTI ARNP  
Address: 5254 HORSESHOE POINT ROAD  
City-St-Zip: STUART, FL 34997

Title: D ( ) Change (X) Addition  
Name: HARDY, OTIS J  
Address: 231 WRENA DR.  
City-St-Zip: WEST PALM BEACH, FL 33409 US

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: OTIS J. HARDY

D

11/04/2009

Electronic Signature of Signing Officer or Director

Date