2001	UNIFORM BUS	NESS REPO	RT (UBF	R)	
DOCUMENT # P0000006234 1. Entity Name				SECRETARY OF STATE DIVISION OF CORPORATIONS	
Medi-Gap Direct, Inc				01 JUL 25 AM 6: 28	
Pinsign Place of Business Blvd Sixth Floor Clearwater FL 33763 Sixth Floor Clearwater FL 33763					
Principal Place of Business 3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.		, DO NOT WRITE IN THIS SPACE	
City & State		City & State		4. FEI Number 59-3639603 Applied For Not Applied For	
Zip	Country	Zip	Country	5. Certificate of Status Desired \$8.75 Additional Fee Required	
т	6. Name and Address of Current I	Registered Agent	Name	7. Name and Address of New Registered Agent Shatanoff, Robert Harry	
Thornton, R. Maury 2536 Countryside Blvd			Street Ad	Street Addres 2536 Ecouly mysice Blyczeptable)	
Sixth Floor			ļ	Sixth Floor	
Clearwater FL 33763			City	Clearwater FL Zip Code 3763	
8. The above	named entity submits this statement for	the purpose of changing its	registered office or	r registered agent, or both, in the State of Florida.	
SIGNATURE _	Signature (typed or grinled name of registered agent a	Shalay	Registered Agent suggette	5 -25-01 ture required when reinstating) OATE	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$550.00 Make Check Payable to Department of State To Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees					
11.	P/D OFFICERS AND		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
NAME STREET ADORESS CITY-ST-ZIP	Smith, John 2536 Countryside Blvd 6th I Clearwater FL 33763 VP/S	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cooper-Smith, Margaret A 2536 Countryside Blvd 6th I Clearwater FL 33763	☐ Delete	TITLE MAME STREET ADDRESS CITY-ST-ZIP	400004523594 -08/08/0101019c-064************************************	
FITLE NAME STREET ADDRESS CITY-ST-ZIP	Thornton, R. Maury 2536 Countryside Blvd 6th I Clearwater FL 33763	Cloor	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	
TITLE - NAME STREET ADDRESS CITY-ST-ZIP	1	☐ Delete	TITLE NAME STREET ADDRESS ÇITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE 'NAME STRÆET AODRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE MAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition	

13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 expowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with a laddless, with all other like expowered. June 25, 2001

(727) 726-0726

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

Pursuant to the provisions of section 607.0502 or 607.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both in the State of Florida.

- 1. The name of the Corporation is: Medi-Gap Direct, Inc.
- 1a. Date of Incorporation: 1/11/00 Document Number: P00000006234
- 2. The name and address of the current registered agent and office:

R. Maury Thornton 2536 Countryside Blvd. 6th Floor Clearwater, FL 33773

3. The name and address of the new registered agent and office:

Robert Harry Shatanoff 2536 Countryside Blvd. 6th Floor Clearwater, FL 33773

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the Board.

Date: June 25, 2001

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, 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.

Date: June 25, 2001