2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000031954

Entity Name: BILL BYRD, M.D., PA

FILED Oct 16, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

500 EAST STATE ROAD 434 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

511 MATILDA PLACE PO BOX 940717 MAITLAND, FL 32494 LONGWOOD, FL 32750

FEI Number: 59-2635255 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BYRD, BILL M.D. 511 MATILDA PLACE LONGWOOD, FL 32750 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: BILL BYRD

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition Title: DPST () Delete

BYRD, BILL M.D. Name: Name: 511 MATILDA PLACE Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip:

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

SIGNATURE: BILL BYRD **DPST** 10/16/2007

Electronic Signature of Signing Officer or Director

Date