

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000035443

Entity Name: FEITZ FOOT CLINIC, P.A.

FILED
Oct 15, 2010
Secretary of State

Current Principal Place of Business:

2424 FRANKFORD AVE.
PANAMA CITY, FL 32405

New Principal Place of Business:

2424 FRANKFORD AVE.
PANAMA CITY, FL 32405 US

Current Mailing Address:

2424 FRANKFORD AVE.
PANAMA CITY, FL 32405

New Mailing Address:

2424 FRANKFORD AVE.
PANAMA CITY, FL 32405 US

FEI Number: 91-2128328

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEITZ, DANIEL E
2424 FRANKFORD AVE.
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

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: DANIEL E FEITZ

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PSTD
Name: FEITZ, DANIEL E
Address: 2424 FRANKFORD AVE.
City-St-Zip: PANAMA CITY, FL 32405 US

Title: D
Name: MILNER, MARTHA
Address: 2424 FRANKFORD AVE.
City-St-Zip: PANAMA CITY, FL 32405 US

Title: VP
Name: STIEGLER, ROBERT W
Address: 2424 FRANKFORD AVE
City-St-Zip: PANAMA CITY, FL 32405 US

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

SIGNATURE: DANIEL E FEITZ

P

10/15/2010

Electronic Signature of Signing Officer or Director

Date