2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000074460

FILED Jan 03, 2007 Secretary of State

Entity Name: ABC PROSTHETICS & ORTHOTICS OF CLERMONT, INC.

New Principal Place of Business: Current Principal Place of Business: 235 CITRUS TOWER BLVD. STE 108 CLERMONT, FL 34711 **Current Mailing Address: New Mailing Address:** 1815 S. DIVISION AVE ORLANDO, FL 32805 FEI Number: 59-3737480 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: SAUNDERS, J L 9050 CLASSIC COURT ORLANDO, FL 32819 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: JL SAUNDERS 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: Title: () Delete () Change () Addition SAUNDERS, SCOTT L Name: Name: 6709 SPRING RAIN Address: Address: City-St-Zip: ORLANDO, FL 32819 City-St-Zip: Title: VΡ Title: () Change () Addition () Delete SAUNDERS, J L Name: Name: 9050 CLASSIC COURT Address: Address: ORLANDO, FL 32819 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JL SAUNDERS VP 01/03/2007