

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000114064

**FILED**  
**Apr 12, 2011**  
**Secretary of State**

**Entity Name:** JOSEPH N. DELUCA, M.D., PH.D., P.A.

**Current Principal Place of Business:**

417 CENTERPOINTE CIR., STE. 1747  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

417 CENTERPOINTE CIRCLE  
SUITE 1747  
ALTAMONTE SPRINGS, FL 32701

**Current Mailing Address:**

417 CENTERPOINTE CIR., STE. 1747  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

417 CENTERPOINTE CIRCLE  
SUITE 1747  
ALTAMONTE SPRINGS, FL 32701

**FEI Number:** 02-0547593

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JURGENS, J.A. P.A.  
505 WEKIVA SPRINGS RD., STE. 500  
LONGWOOD, FL 32779 US

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

GARDBERG-DELUCA, PEARLENE S  
417 CENTERPOINTE CIRCLE  
SUITE 1747  
ALTAMONTE SPRINGS, FL 32701 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: PEARLENE S. GARDBERG-DELUCA

04/12/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PTD  
Name: DELUCA, JOSEPH N  
Address: 417 CENTERPOINTE CIR., STE. 1747  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VS  
Name: GARDBERG-DELUCA, PEARLENE  
Address: 417 CENTERPOINTE CIR. - SUITE 1747  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

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: JOSEPH N. DELUCA

PTD

04/12/2011

Electronic Signature of Signing Officer or Director

Date