

# 2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000001242

FILED  
Oct 10, 2005  
Secretary of State

Entity Name: BERNEDETTE SACCOMANNO, M.D., P.A.

**Current Principal Place of Business:**

8010 S.W. 70TH PLACE  
GAINESVILLE, FL 32608

**New Principal Place of Business:**

**Current Mailing Address:**

8010 S.W. 70TH PLACE  
GAINESVILLE, FL 32608

**New Mailing Address:**

FEI Number: 95-4893292

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WADE, DANIEL J  
3341 E SILVER SPRINGS BLVD. STE F  
OCALA, FL 34470 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 WADE

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:**

Title: DPT ( ) Delete  
Name: SACCOMANNO, BERNEDETTE  
Address: 8010 S.W. 70TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: MEADER, SHAWN R  
Address: 8010 SW 70TH PLACE  
City-St-Zip: GAINESVILLE, FL 32608

Title: D ( ) Delete  
Name: WADE, DANIEL J  
Address: 3391 E SILVER SPRINGS BLVD STE F  
City-St-Zip: OCALA, FL 34470

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: BERNEDETTE SACCOMANNO

DPT

10/10/2005

Electronic Signature of Signing Officer or Director

Date