

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P02000099953

FILED
Oct 30, 2007
Secretary of State

Entity Name: PHYSICIAN SERVICES OF SARASOTA, INC.

Current Principal Place of Business:

2222 S. TAMIAMI TRAIL
STE. C
SARASOTA, FL 34239

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2593
SARASOTA, FL 342306766

New Mailing Address:

FEI Number: 16-1628004

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PREWETT, DANIEL L
5777 BENEVA RD S
SARASOTA, FL 34233 US

Name and Address of New Registered Agent:

DAVID, SHEPARD
2222 SOUTH TAMIAMI TRAIL
SUITE C
SARASOTA, FL 34239 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: DAVID SHEPARD

10/30/2007

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: D () Delete
Name: LIEURANCE, JOHN A
Address: 622 AVENIDA DE MAYO
City-St-Zip: SARASOTA, FL 34242

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: OFF (X) Change () Addition
Name: LIEURANCE, JOHN A
Address: 622 AVENIDA DE MAYO
City-St-Zip: SARASOTA, FL 34242

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: JOHN A. LIEURANCE

OFF

10/30/2007

Electronic Signature of Signing Officer or Director

Date