

2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000012792

**FILED
Oct 03, 2010
Secretary of State**

Entity Name: ACCORD INSURANCE NETWORK OF PALM COAST, INC.

Current Principal Place of Business:

1 FLORIDA PARK DRIVE SOUTH
SUITE 340
PALM COAST, FL 32137

New Principal Place of Business:

Current Mailing Address:

1 FLORIDA PARK DRIVE SOUTH
SUITE 340
PALM COAST, FL 32137

New Mailing Address:

FEI Number: 13-4236088 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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: MONICA OLIVER

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PTD
Name: OLIVER, MONICA
Address: 1 FLORIDA PARK DRIVE, SUITE 340
City-St-Zip: PALM COAST, FL 32137

Title: SVD
Name: SAPP, J. NORMAN
Address: 1 FLORIDA PARK DRIVE, SUITE 340
City-St-Zip: PALM COAST, FL 32137

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: MONICA OLIVER

Electronic Signature of Signing Officer or Director

PTD

10/03/2010

Date