

2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000053152

Entity Name: COUNTRYSIDE NEUROLOGY, INC.

FILED
Oct 06, 2006
Secretary of State

Current Principal Place of Business:

2349 SUNSET POINT ROAD
403
CLEARWATER, FL 33765

Current Mailing Address:

2349 SUNSET POINT ROAD
403
CLEARWATER, FL 33765

New Principal Place of Business:

1840 MEASE DR.
407B
SAFETY HARBOR, FL 34695

New Mailing Address:

P.O. BOX 5048
CLEARWATER, FL 33758 US

FEI Number: 20-0924147

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KHADEMI-KERMANSHAHI, ARDESHIR
2349 SUNSET POINT ROAD, STE 403
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

KHADEMI-KERMANSHAHI, ARDESHIR
1840 MEASE DR., SUITE407B
SAFETY HARBOR, FL 34695 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: ARDESHIR KHADEMI

10/06/2006

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: KHADEMI-KERMANSHAHI, ARDESHIR
Address: 2349 SUNSET POINT ROAD, STE 403
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: ZIAEE, ANAHITA
Address: 6545 TAILFEATHER WAY
City-St-Zip: BRADENTON, FL 34203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KHADEMI-KERMANSHAHI, ARDESHIR
Address: 394 TALL OAK TRAIL
City-St-Zip: TARPON SPRINGS, FL 34688

Title: D (X) Change () Addition
Name: ZIAEE, ANAHITA
Address: 1840 MEASE DR., SUITE407B
City-St-Zip: SAFETY HARBOR, FL 34695

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: ARDESHIR KHADEMI

PRES

10/06/2006

Electronic Signature of Signing Officer or Director

Date