

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000067131

FILED
Oct 17, 2014
Secretary of State

Entity Name: PALM BEACH PODIATRIC CENTER, INC.

Current Principal Place of Business:

10515 WEST FOREST HILL BOULEVARD
302
WELLINGTON, FL 33414

New Principal Place of Business:

3347 SOUTH STATE ROAD 7
202
WELLINGTON, FL 33449 US

Current Mailing Address:

10515 WEST FOREST HILL BOULEVARD
302
WELLINGTON, FL 33414

New Mailing Address:

3347 SOUTH STATE ROAD 7
202
WELLINGTON, FL 33449 US

FEI Number: 20-1048255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LERNER, JEFFREY DR.
10515 WEST FOREST HILL BOULEVARD
302
WELLINGTON, FL 33414 US

Name and Address of New Registered Agent:

LERNER, JEFFREY DR.
3347 SOUTH STATE ROAD 7
202
WELLINGTON, FL 33449 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: DR. JEFFREY LERNER

10/17/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DPM
Name: LERNER, JEFFREY
Address: 3347 SOUTH STATE ROAD 7, SUITE 202
City-St-Zip: WELLINGTON, FL 33449 US

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: DR. JEFFREY LERNER

DPM

10/17/2014

Electronic Signature of Signing Officer or Director

Date