## 2009 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000074813

**FILED** Feb 16, 2009 Secretary of State

Entity Name: FREEMAN MEDICAL GROUP, INC. **Current Principal Place of Business: New Principal Place of Business:** 9015 ABB PITTMAN ROAD MILTON, FL 32570 **Current Mailing Address: New Mailing Address:** 9015 ABB PITTMAN ROAD MILTON, FL 32570 FEI Number: 20-1107909 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FREEMAN, ROBERT W 9015 ABB PITTMAN RD MILTON, FL 32570 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: ROBERT W FREEMAN Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FREEMAN, TONYA Name: Name: 9015 ABB FREEMAN ROAD Address: Address: City-St-Zip: MILTON, FL 32570 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition FREEMAN, TONYA B Name: Name: Address: Address: 4800 N 9TH AVE. PENSACOLA, FL 32503 City-St-Zip: City-St-Zip:

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.

Ρ SIGNATURE: TONYA B. FREEMAN 02/16/2009