

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000075231

**FILED**  
**Apr 06, 2011**  
**Secretary of State**

**Entity Name:** CHARLES R. ALEXANDER, P.A.

**Current Principal Place of Business:**

939 N. UNIVERSITY DR  
CORAL SPRINGS, FL 33071

**New Principal Place of Business:**

**Current Mailing Address:**

939 N. UNIVERSITY DR  
CORAL SPRINGS, FL 33071

**New Mailing Address:**

**FEI Number:** 01-0813480

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ALEXANDER, CHARLES  
939 N. UNIVERSITY DR  
CORAL SPRINGS, FL 33071 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:** CHARLES R. ALEXANDER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** ALEXANDER, CHARLES  
**Address:** 939 N. UNIVERSITY DR  
**City-St-Zip:** CORAL SPRINGS, FL 33071

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:** CHARLES R. ALEXANDER

MR.

04/06/2011

Electronic Signature of Signing Officer or Director

Date