## 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000167409

Entity Name: NORTHEAST FLORIDA CARDIOLOGY, P.A.

FILED Oct 04, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5000 US HIGHWAY 17 5000 US HIGHWAY 17 SUITE 17 #288 SUITE 18 #288 ORANGE PARK, FL 32003 ORANGE PARK, FL 32003

Current Mailing Address: New Mailing Address:

5000 US HIGHWAY 17 5000 US HIGHWAY 17 SUITE 17 #288 SUITE 18 #288 ORANGE PARK, FL 32003 ORANGE PARK, FL 32003

FEI Number: 16-1711976 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:

ROMERO, ALFRED T MD
5000 US HIGHWAY 17
5UITE 17 #288
ORANGE PARK, FL 32003 US

ROMERO, ALFRED T MD
5000 US HIGHWAY 17
SUITE 18 #288
ORANGE PARK, FL 32003 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: ALFRED T ROMERO, MD 10/04/2010

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: [

Name: ROMERO, ALFRED T MD

Address: 5000 US HIGHWAY 17 SUITE 18 #288

City-St-Zip: ORANGE PARK, FL 32003

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: ALFRED T. ROMERO, MD D 10/04/2010