

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P07000127761

**FILED**  
**Dec 13, 2012**  
**Secretary of State**

**Entity Name:** JOAN T. COOPER, PH.D., P.A.

**Current Principal Place of Business:**

8259 NORTH MILITARY TRAIL, SUITE 12  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

8259 NORTH MILITARY TRAIL, SUITE 12  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

**FEI Number:** 22-3972919

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

COOPER, JOAN T DR.  
8259 N MILITARY TRAIL  
SUITE 12  
PALM BEACH GARDENS, FL 33410 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:** JOAN T. COOPER

12/13/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PSTD  
**Name:** COOPER, JOAN T PH.D.  
**Address:** 8259 NORTH MILITARY TRAIL, SUITE 12  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410

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:** JOAN T. COOPER

PRES

12/13/2012

Electronic Signature of Signing Officer or Director

Date