2013 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 30, 2013
Secretary of State

DOCUMENT# P07000133978

Entity Name: FIRST FAMILY PRACTICE, INC.

Current Principal Place of Business:

320 1ST ST S
200
WINTER HAVEN, FL 33880 US

New Principal Place of Business:

Current Mailing Address:

320 1ST ST S
200
WINTER HAVEN, FL 33880 US

New Mailing Address:

FEI Number: 26-1610821 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOUISVILLE, TOMMY L
320 1ST ST S
200
WINTER HAVEN, FL 33880 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: TOMMY L LOUISVILLE
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PSTD
Name: LOUISVILLE, TOMMY L
Address: 221 OLD SPANISH WAY
City-St-Zip: WINTER HAVEN, FL 33884 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: TOMMY L LOUISVILLE CEO 04/30/2013
Electronic Signature of Signing Officer or Director Date