

# **2010 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P08000000318

Entity Name: SCOTT A. SELIS, PA

**FILED**  
**Oct 04, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

1540 CORNERSTONE BLVD.  
SUITE 200  
DAYTONA BEACH, FL 32117 US

## **Current Mailing Address:**

1540 CORNERSTONE BLVD.  
SUITE 200  
DAYTONA BEACH, FL 32117 US

## **New Principal Place of Business:**

570 MEMORIAL CIRCLE  
SUITE 200  
ORMOND BEACH, FL 32174 US

## **New Mailing Address:**

570 MEMORIAL CIRCLE  
SUITE 200  
ORMOND BEACH, FL 32174 US

FEI Number: 26-1771569

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SELIS, SCOTT A  
1540 CORNERSTONE BLVD., STE 200  
DAYTONA BEACH, FL 32117 US

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

SELIS, SCOTT A  
570 MEMORIAL CIRCLE  
SUITE 200  
ORMOND BEACH, FL 32174 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: SCOTT A. SELIS

10/04/2010

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P  
Name: SELIS, SCOTT A  
Address: 570 MEMORIAL CIRCLE, SUITE 200  
City-St-Zip: ORMOND BEACH, FL 32174 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: SCOTT A. SELIS

PRES

10/04/2010

Electronic Signature of Signing Officer or Director

Date