

2013 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P08000104500

FILED
Jan 23, 2013
Secretary of State

Entity Name: WOMENS HEALTH CENTERS OF FLORIDA, INC.

Current Principal Place of Business:

430 WAYMONT COURT
SUITE 100
LAKE MARY, FL 32746

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 952816
LAKE MARY, FL 32795

New Mailing Address:

FEI Number: 26-3094562

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRIN, ANTHONY D.O.
430 WAYMONT COURT
SUITE 100
LAKE MARY, FL 32746 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: ANTHONY PERRIN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PERRIN, ANTHONY T D.O.
Address: 430 WAYMONT COURT
City-St-Zip: LAKE MARY, FL 32746

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: ANTHONY PERRIN

PRES

01/23/2013

Electronic Signature of Signing Officer or Director

Date