

# **2011 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000012553

**FILED**  
**Mar 22, 2011**  
**Secretary of State**

**Entity Name:** PROFESSIONAL SERVICES GROUP OF SW FLORIDA, INC.

**Current Principal Place of Business:**

13300-56 SOUTH CLEVELAND AVENUE  
SUITE 640  
FORT MYERS, FL 33907

**New Principal Place of Business:**

**Current Mailing Address:**

13300-56 SOUTH CLEVELAND AVENUE  
SUITE 640  
FORT MYERS, FL 33907

**New Mailing Address:**

**FEI Number:** 26-4234808

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

OXLEY, ROBERT L  
13300-56 SOUTH CLEVELAND AVENUE  
SUITE 640  
FORT MYERS, FL 33907 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: ROBERT L OXLEY

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: OXLEY, ROBERT L  
Address: 13300-56 SOUTH CLEVELAND AVENUE, SUITE 640  
City-St-Zip: FORT MYERS, FL 33907

Title: VP  
Name: OXLEY, ROBERT L  
Address: 13300-56 SOUTH CLEVELAND AVENUE, SUITE 640  
City-St-Zip: FORT MYERS, FL 33907

Title: SEC  
Name: OXLEY, ROBERT L  
Address: 13300-56 SOUTH CLEVELAND AVENUE, SUITE 640  
City-St-Zip: FORT MYERS, FL 33907

Title: TR  
Name: OXLEY, ROBERT L  
Address: 13300-56 SOUTH CLEVELAND AVENUE, SUITE 640  
City-St-Zip: FORT MYERS, FL 33907

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: ROBERT L OXLEY

PRES

03/22/2011

Electronic Signature of Signing Officer or Director

Date