

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P09000032396

**FILED**  
**Oct 02, 2014**  
**Secretary of State**

**Entity Name:** ROBERT B. MAGGIANO, D.O., ABFP-C, P.A.

**Current Principal Place of Business:**

6314 WHISKEY CREEK DR SUITE A  
FT MYERS, FL 33919

**New Principal Place of Business:**

1550 MCGREGOR BLVD STE 101  
FT MYERS, FL 33908

**Current Mailing Address:**

6314 WHISKEY CREEK DR SUITE A  
FT MYERS, FL 33919

**New Mailing Address:**

15550 MCGREGOR BLVD STE 101  
FT MYERS, FL 33908

**FEI Number:** 26-4730148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BELCHER, W. GUS II ESQ  
1375 JACKSON STREET SUITE 303  
FT MYERS, FL 33901 US

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

MAGGIANO, ROBERT  
1550 MCGREGOR BLVD STE 101  
FT MYERS, FL 33908 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: ROBERT MAGGIANO

10/02/2014

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: MAGGIANO, ROBERT B DO  
Address: 6314 WHISKEY CREEK DR SUITE A  
City-St-Zip: FT MYERS, FL 33919

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 MAGGIANO

P

10/02/2014

Electronic Signature of Signing Officer or Director

Date