2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Nov 12, 2009
Secretary of State

DOCUMENT# P92000007329

Entity Name: S. WALLIS PINSLEY, D.O., P.A.

Current Principal Place of Business:

1325 S. CONGRESS AVE.
SUITE #207
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

6686 GRANDE ORCHID WAY
DELRAY BEACH, FL 33446 US

Current Mailing Address:

1325 S. CONGRESS AVE.
SUITE #207
BOYNTON BEACH, FL 33426 US

New Mailing Address:

6686 GRANDE ORCHID WAY
DELRAY BEACH, FL 33446 US

FEI Number: 65-0376883 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PINSLEY, DR. SHERRI W
1325 S. CONGRESSS AVE #207
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

PINSLEY, DR. SHERRI W
6686 GRANDE ORCHID WAY
DELRAY BEACH, FL 33446 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: DR.SHERRI W. PINSLEY 11/12/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PINSLEY, SHERRY W DRS
Address: 1325 SO. CONGRESS AVE., STE 207
City-St-Zip: BOYNTON BEACH, FL 33426

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: PINSLEY, SHERRY W DRS
Address: 6686 GRANDE ORCHID WAY
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DR. SHERRI W. PINSLEY D 11/12/2009
Electronic Signature of Signing Officer or Director Date