

2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000056766

FILED
Nov 10, 2011
Secretary of State

Entity Name: TEQUESTA HEALTH CENTER, INC.

Current Principal Place of Business:

169 TEQUESTA DRIVE
SUITE 12E
TEQUESTA, FL 33469

New Principal Place of Business:

Current Mailing Address:

169 TEQUESTA DRIVE
SUITE 12E
TEQUESTA, FL 33469

New Mailing Address:

FEI Number: 65-0938508

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MURPHY, BONNIE M DO
169 TEQUESTA DR
STE 12E
TEQUESTA, FL 33469 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: MARK CORRY

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD
Name: MURPHY, BONNIE M
Address: 169 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

Title: PST
Name: CORRY, MARK
Address: 169 TEQUESTA DR
City-St-Zip: TEQUESTA, FL 33469

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: MARK CORRY

Electronic Signature of Signing Officer or Director

PST

11/10/2011

Date