

2014 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# V66227

FILED
May 12, 2014
Secretary of State

Entity Name: DIALYSIS AND KIDNEY CENTER OF NORTH BREVARD, INC.

Current Principal Place of Business:

830 CENTURY MEDICAL DR
UNIT C
TITUSVILLE, FL 32796

New Principal Place of Business:

Current Mailing Address:

830 CENTURY MEDICAL DR
UNIT C
TITUSVILLE, FL 32796

New Mailing Address:

FEI Number: 59-3155506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEE, MANUEL G. MD
830 CENTURY MEDICAL DR
UNIT C
TITUSVILLE, FL 32796 US

Name and Address of New Registered Agent:

MCALPINE, CHRISTOPHER
830 CENTURY MEDICAL DR
UNIT C
TITUSVILLE, FL 32796 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: CHRISTOPHER MCALPINE

05/12/2014

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: RA
Name: MCALPINE, CHRISTOPHER
Address: 835 CENTURY MEDICAL DR
City-St-Zip: TITUSVILLE, FL 32796

Title: RA
Name: BOYLES, WILLIAM
Address: 835 CENTURY MEDICAL DR
City-St-Zip: TITUSVILLE, FL 32796

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: CHRISTOPHER MCALPINE

RA

05/12/2014

Electronic Signature of Signing Officer or Director

Date