2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2011
Secretary of State

DOCUMENT# 597201

Entity Name: NEUBAUER HYPERBARIC NEUROLOGIC CENTER INC

Current Principal Place of Business:

4001 NORTH OCEAN DRIVE
SUITE 105
LAUDERDALE BY THE SEA, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

4001 NORTH OCEAN DRIVE
SUITE 105
LAUDERDALE BY THE SEA, FL 33308 US

New Mailing Address:

FEI Number: 59-1866807 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REILLY, VINCE
4001 NORTH OCEAN DRIVE
SUITE 105
LAUDERDALE BY THE SEA, FL 33308 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: _____

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: DAVIGLUS, GEORGE M.D.
Address: 4001 N. OCEAN DRIVE
City-St-Zip: LAUD BY THE SEA, FL

Title: P
Name: NEUBAUER, VIRGINIA
Address: 4001 NORTH OCEAN DRIVE
City-St-Zip: LAUD BY THE SEA, FL 33308

Title: V
Name: NEUBAUER, MARION
Address: 4001 NORTH OCEAN DRIVE
City-St-Zip: LAUD BY THE SEA, FL 33308

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: VINCE REILLY RA 04/18/2011

Electronic Signature of Signing Officer or Director Date