2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2008
Secretary of State

DOCUMENT# P04000121037

Entity Name: NEUROLOGICAL RESEARCH AND TREATMENT CENTERS OF FLORIDA, P.A.

Current Principal Place of Business:

6080 BOYNTON BEACH BLVD
SUITE 100
BOYNTON BEACH, FL 33437

New Principal Place of Business:

Current Mailing Address:

6080 BOYNTON BEACH BLVD
SUITE 100
BOYNTON BEACH, FL 33437

New Mailing Address:

10151 ENTERPRISE CENTER BLVD
SUITE 202
BOYNTON BEACH, FL 33437

FEI Number: 20-1544786 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SCHNEIDERMAN, LES ESQ
5301 N FEDERAL HWY STE 130
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

SCHIFTAN, ROBERT O
10151 ENTERPRISE CENTER BLVD
SUITE 202
BOYNTON BEACH, FL 33437 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 O SCHIFTAN 07/09/2008
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: SCHIFTAN, ROBERT O
Address: 6080 BOYNTON BEACH BLVD STE 100
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: SCHIFTAN, ROBERT O
Address: 10151 ENTERPRISE CENTER BLVD, SUITE 202
City-St-Zip: BOYNTON BEACH, FL 33437

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: ROBERT O SCHIFTAN D 07/09/2008
Electronic Signature of Signing Officer or Director Date