

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000001749

FILED
Apr 28, 2009
Secretary of State

Entity Name: NEURAL ENGINEERING CLINIC, INC.

Current Principal Place of Business:

330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH, FL 32951

New Mailing Address:

FEI Number: 01-0494502

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, ROSS MD
330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH, FL, FL 32951 US

Name and Address of New Registered Agent:

DAVIS, ROSS PCD
330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH,, FL 32951 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: ROSS DAVIS

04/28/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCD () Delete
Name: DAVIS, ROSS M.D.
Address: 330 HAMMOCK SHORE DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TREA () Delete
Name: VANSTEENBERG, INGRID
Address: 331 COMMERCIAL ST/PO BOX 845
City-St-Zip: ROCKPORT, ME 04856

Title: D () Delete
Name: DAVIS-HODGKINS, MEGAN PH.D.
Address: 13545 111ST,
City-St-Zip: FELLSMERE, FL 32948

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSS DAVIS

PCD

04/28/2009

Electronic Signature of Signing Officer or Director

Date