

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005980

**Entity Name:** VOICE AND SWALLOW CENTER, INC.

**Current Principal Place of Business:**

8645 N MILITARY TRAIL  
SUITE 510  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

8645 N MILITARY TRAIL  
SUITE 510  
PALM BEACH GARDENS, FL 33410 US

**FEI Number:** 65-0952691

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GOULD, REBECCA L  
8645 N MILITARY TRAIL  
SUITE 510  
PALM BEACH GARDENS, FL 33410 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            D  
Name            GOULD, REBECCA L  
Address        8645 N MILITARY TRAIL  
                  SUITE 510  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            D  
Name            SAMARIN, LORI  
Address        8645 N MILITARY TRAIL  
                  SUITE 510  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title            D  
Name            CRANE, JOHN J  
Address        8645 N MILITARY TRAIL  
                  SUITE 510  
City-State-Zip: PALM BEACH GARDENS FL 33410

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

**SIGNATURE:** REBECCA GOULD

**PRESIDENT**

**04/26/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date