## 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129285

Entity Name: THE PAIN INSTITUTE, INC.

**Current Principal Place of Business:** 

595 N. COURTENAY PARKWAY SUITE 101 MERRITT ISLAND, FL 32953

## **Current Mailing Address:**

595 N. COURTENAY PARKWAY SUITE 101 MERRITT ISLAND, FL 32953 US

FEI Number: 32-0159014 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

O'BRIEN, JAMES M 1686 W. HIBISCUS BLVD MELBOURNE, FL 32901 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

**FILED** Apr 28, 2017

**Secretary of State** 

CC5065420309

## Officer/Director Detail:

Title Title

GAYLES, RICHARD EM.D. GOLOVAC, STANLEY M.D. Name Name 4770 HONEYRIDGE LANE Address 1982 SYKES CREEK BLVD Address City-State-Zip: MERRITT ISLAND FL 32952 City-State-Zip: MERRITT ISLAND FL 32953

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.