

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15000077636

Entity Name: PARKINSON CLINICS, INC.

Current Principal Place of Business:

1008 DOLPHIN DRIVE
CAPE CORAL, FL 33904

Current Mailing Address:

1008 DOLPHIN DRIVE
CAPE CORAL, FL 33904 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HINZ, MARTIN C
1008 DOLPHIN DRIVE
CAPE CORAL, FL 33904 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 P
Name HINZ, MARTIN C
Address 1008 DOLPHIN DRIVE
City-State-Zip: CAPE CORAL FL 33904

Title VP
Name HINZ, THAIS M
Address 1008 DOLPHIN DRIVE
City-State-Zip: CAPE CORAL FL 33904

Title T
Name HINZ, MARTIN C III
Address 1008 DOLPHIN DRIVE
City-State-Zip: CAPE CORAL FL 33904

Title S
Name HINZ, JEREMY M
Address 1008 DOLPHIN DRIVE
City-State-Zip: CAPE CORAL FL 33904

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: MARTIN HINZ

P

04/30/2016

Electronic Signature of Signing Officer/Director Detail

Date