

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000000577

Entity Name: NEUROLOGY CLINIC, INC.

Current Principal Place of Business:

1333 PINE ST
MELBOURNE, FL 32901

Current Mailing Address:

1333 PINE ST
MELBOURNE, FL 32901

FEI Number: 59-3217785

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

JOHN KANCILIA
1795 W NASA 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

Officer/Director Detail :

Title D
Name PACKEY, DAVID J
Address 1333 PINE ST
City-State-Zip: MELBOURNE FL 32901

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: DAVID J. PACKEY PH.D., M.D.

OWNER

04/21/2014

Electronic Signature of Signing Officer/Director Detail

Date