

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 388362

Entity Name: NEUROTRONICS, INC.

FILED
Feb 11, 2005
Secretary of State

Current Principal Place of Business:

102 NE 10TH AVE
SUITE 5
GAINESVILLE, FL 32601 US

New Principal Place of Business:

Current Mailing Address:

20825 NE 132 AVENUE
WALDO, FL 32694

New Mailing Address:

FEI Number: 59-1410850

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, JACK R
20825 NE 132 AVENUE
WALDO, FL 32694 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CSD () Delete
Name: SMITH, DARI
Address: 700 S.W. 16TH PLACE
City-St-Zip: GAINESVILLE, FL

Title: PD () Delete
Name: SMITH, JACK
Address: 20825 NE 132 AVENUE
City-St-Zip: WALDO, FL 32697

Title: VD () Delete
Name: MCCARTHY-SMITH,
Address: 20825 NE 132 AVENUE
City-St-Zip: WALDO, FL 32697

Title: C () Delete
Name: SHANAHAN, STACI
Address: 9234 BAY DRIVE
City-St-Zip: SURFSIDE, FL 33154

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VD (X) Change () Addition
Name: MCCARTHY-SMITH, EILEEN
Address: 20825 NE 132 AVENUE
City-St-Zip: WALDO, FL 32697

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

Title: AS () Change (X) Addition
Name: LAURYN, DAWN M
Address: 934 NE 7TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAWN M. LAURYN

AS

02/11/2005

Electronic Signature of Signing Officer or Director

Date