

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741482

FILED
May 16, 2006
Secretary of State

Entity Name: BIOFEEDBACK SOCIETY OF FLORIDA, INC.

Current Principal Place of Business:

1230 S. FEDERAL HWY
SUITE 101
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

Current Mailing Address:

1230 S. FEDERAL HWY
SUITE 101
BOYNTON BEACH, FL 33435 US

New Mailing Address:

FEI Number: 59-2185211 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

EWING, AUBREY K PHD
955 ISLES ROAD
BOYNTON BEACH, FL 33435 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

OFFICERS AND DIRECTORS:

Title: PP () Delete
Name: KITSBERG, MARIE EDS
Address: P O BOX 100987
City-St-Zip: CAPE CORAL E, FL 33910

Title: P () Delete
Name: MONTGOMERY, DOIL PHD
Address: 5680 W ATLANTIC AVE
City-St-Zip: DELRAY BEACH, FL 33484

Title: TM () Delete
Name: EWING, AUBREY K PHD
Address: 2828 S SEACREST BLVD
City-St-Zip: BOYNTON BEACH, FL 33435

Title: S () Delete
Name: PETERSON, KENT MS
Address: 1330 S W 27TH AVE
City-St-Zip: DEERFIELD BEACH, FL 33442

Title: D () Delete
Name: ANDRASIK, FRANK PHD
Address: 40 S ALCANIZ ST
City-St-Zip: PENSACOLA, FL 32501

Title: D () Delete
Name: MARCUS, STEVE PH.D.
Address: 2819 W HORATIO ST
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AUBREY K. EWING, PH.D.

TM

05/16/2006

Electronic Signature of Signing Officer or Director

Date