2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2004
Secretary of State

DOCUMENT# F01000001749

Entity Name: NEURAL ENGINEERING CLINIC, INC.

Current Principal Place of Business:

330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH, FL 32951

New Mailing Address:

FEI Number: 01-0494502 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DAVIS, ROSS MD
330 HAMMOCK SHORE DRIVE
MELBOURNE BEACH, FL 32951

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

OFFICERS AND DIRECTORS:

Title: PCD ( ) Delete
Name: DAVIS, ROSS M.D.
Address: 330 HAMMOCK SHORE DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: STD ( ) Delete
Name: EMMONS, SANDRA
Address: R1 #685
City-St-Zip: RICHMOND, ME 04357

Title: D ( ) Delete
Name: MCKENDRY, JAMES M.D.
Address: P.O. BOX 264
City-St-Zip: MANCHESTER, ME 04351

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: STD (X) Change ( ) Addition
Name: VANSTEENBERG, INGRID
Address: 300 COMMERICAL ST
City-St-Zip: ROCKPORT, ME 04856

Title: D (X) Change ( ) Addition
Name: EMMONS, SANDRA
Address: R1#685
City-St-Zip: RICHMOND, ME 04357

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSS DAVIS PRES 04/06/2004

Electronic Signature of Signing Officer or Director — Date