

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H96440

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: BIOFEEDBACK ASSOCIATES OF NORTHEAST FLORIDA, INC.

## Current Principal Place of Business:

11512 LAKE MEAD AVE.  
SUITE 703  
JACKSONVILLE, FL 32256

## New Principal Place of Business:

## Current Mailing Address:

11512 LAKE MEAD AVE  
SUITE 703  
JACKSONVILLE, FL 32256 US

## New Mailing Address:

FEI Number: 59-2642300

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KOEGLER, STEVEN C.  
27 PONTE VEDRA PARK DR  
BLDG 100 STE 200  
PONTE VEDRA, FL 32082 US

## Name and Address of New Registered Agent:

GRENADIER, ANN  
11512 LAKE MEAD AVE.  
703  
JACKSONVILLE, FL FL 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: ANN GRENADIER

01/21/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: GRENADIER, ANN G.,  
Address: 11512 LAKE MEAD AVE, #703  
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP ( ) Delete  
Name: BUTTERWORTH, IVY  
Address: 11512 LAKE MEAD AVE, #703  
City-St-Zip: JACKSONVILLE, FL 32256

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: IVY BUTTERWORTH

MRS.

01/21/2009

Electronic Signature of Signing Officer or Director

Date