

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000021403

FILED
Mar 06, 2012
Secretary of State

Entity Name: TRAUMATIC BRAIN INJURY CENTERS, LLC

Current Principal Place of Business:

2065 NW 15TH PLACE
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

2065 NW 15TH PLACE
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 27-2838719

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVID W. SOUTHWELL CPA, PLLC
16191 NW 57TH AVE.
MIAMI, FL 33014 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

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: PRICE, DAVID J DR
Address: 2065 NW 15TH PLACE
City-St-Zip: DELRAY BEACH, FL 33445

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DR PRICE

DIR

03/06/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date