

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000113920

FILED
Apr 18, 2012
Secretary of State

Entity Name: NEUROLOGICAL PROGRAM SOLUTIONS LLC

Current Principal Place of Business:

8466 NORTH LOCKWOOD RIDGE ROAD
#340
SARASOTA, FL 34243 US

New Principal Place of Business:

Current Mailing Address:

8466 NORTH LOCKWOOD RIDGE ROAD
#340
SARASOTA, FL 34243 US

New Mailing Address:

FEI Number: 45-3545781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
SUITE A
TAMPA, FL 33612 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: MGRM
Name: YOUNG, WILLIAM A
Address: 8466 NORTH LOCKWOOD RIDGE ROAD #340
City-St-Zip: SARASOTA, FL 34243 US

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: WILLIAM A YOUNG

MGRM

04/18/2012

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