

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L32915

**FILED**  
**Apr 30, 2005**  
**Secretary of State**

**Entity Name:** THE BALANCE DISORDERS CLINIC, INC.

**Current Principal Place of Business:**

1401 CENTERVILLE RD., SUITE 510  
TALLAHASSEE, FL 32308 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 13393  
TALLAHASSEE, FL 32317

**New Mailing Address:**

**FEI Number:** 59-2984100

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MAITLAND, CHARLES G  
4935 ARDEN FORREST WAY  
TALLAHASSEE, FL 32308 US

**Name and Address of New Registered Agent:**

MAITLAND, CHARLES G  
4935 ARDEN FORREST WAY  
TALLAHASSEE, FL 32309 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

04/30/2005

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MAITLAND, CHARLES G  
Address: 4935 ARDEN FORREST WAY  
City-St-Zip: TALLAHASSEE, FL 32308

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: MAITLAND, CHARLES G  
Address: 4935 ARDEN FORREST WAY  
City-St-Zip: TALLAHASSEE, FL 32309

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

SIGNATURE: LYNNE ANN MAITLAND

Electronic Signature of Signing Officer or Director

AP

04/30/2005

Date