2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 09, 2009
Secretary of State

DOCUMENT# L99000001846

Entity Name: BRAIN AND SPINE, L.L.C.

Current Principal Place of Business:

2011 NORTH HARRISON AVENUE
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

2011 NORTH HARRISON AVENUE
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 59-3572738 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRYANT, ROWLETT W
833 HARRISON AVENUE
PANAMA CITY, FL 32401 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 ( ) Delete
Name: STRINGER, DOUGLAS L
Address: 2011 NORTH HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM ( ) Delete
Name: STRINGER, MERLE P
Address: 2011 NORTH HARRISON AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM ( ) Delete
Name: ELZAWAHRY, KAMEL
Address: 2202 STATE AVENUE
City-St-Zip: PANAMA CITY, FL 32405

Title: MGRM ( ) Delete
Name: STRINGER-MADDOX, KARIN
Address: 2202 STATE AVENUE, STE 201
City-St-Zip: PANAMA CITY, FL 32405

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

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

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

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

Title: MGRM ( ) Change (X) Addition
Name: SALEH, FIRAS
Address: 2202 STATE AVENUE
City-St-Zip: PANAMA CITY, FL 32405

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 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: MERLE P. STRINGER MGRM 04/09/2009

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