

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 04, 2007
Secretary of State**

DOCUMENT# N02000003552

Entity Name: THE MOVEMENT DISORDERS SOCIETY OF SOUTHWEST FLORIDA FOUNDATION, INC.

Current Principal Place of Business:

P.O. BOX 494506
PORT CHARLOTTE, FL 33949 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 494506
PORT CHARLOTTE, FL 33949 US

New Mailing Address:

FEI Number: 65-1021031 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CELEBRADO, TRACY
2525 HARBOR BLVD
SUITE 312
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

SEYMOUR, JUDITH M
2525 HARBOR BLVD
SUITE 312
PORT CHARLOTTE, FL 33952 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: JUDITH M SEYMOUR

01/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CELEBRADO, TRACY
Address: 2525 HARBOR BLVD SUITE 312
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: D () Delete
Name: GIL, RAMON A MD
Address: 2525 HARBOR BLVD. SUITE 312
City-St-Zip: PORT CHARLOTTE, FL 33952

Title: D () Delete
Name: DIETRICH, CANDICE
Address: 4379 HARBOR BLVD
City-St-Zip: PORT CHARLOTTE, FL 33952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change () Addition
Name: SEYMOUR, JUDITH M
Address: 2525 HARBOR BLVD SUITE 312
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: O (X) Change () Addition
Name: RILEY, DAVID
Address: 2525 HARBOR BLVD. SUITE 312
City-St-Zip: PORT CHARLOTTE, FL 33952

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

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUDITH M SEYMOUR

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01/04/2007

Electronic Signature of Signing Officer or Director

Date