

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003725

FILED
Apr 19, 2005
Secretary of State

Entity Name: BRAINSTORM INSTITUTE, INC.

Current Principal Place of Business:

1944 WESTPOINTE CIRCLE
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

1944 WESTPOINTE CIRCLE
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 20-0305747

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLINS, BRIAN
1944 WESTPOINTE CIRCLE
ORLANDO, FL 32835 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

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: COLLINS, BRIAN A
Address: 1944 WESTPOINTE CIRCLE
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

SIGNATURE: BRIAN COLLINS

PRES

04/19/2005

Electronic Signature of Signing Officer or Director

Date