

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000002417

FILED
Jan 08, 2008
Secretary of State

Entity Name: ASSOCIATION OF NEUROSURGICAL PHYSICIAN ASSISTANTS INC

Current Principal Place of Business:

4267 NW FEDERAL HWY,
202
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

4267 NW FEDERAL HWY,
202
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: 26-0354433 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOTRBA, LINDA
618 HOWARD CREEK LANE
STUART, FL 34994 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: D () Delete
Name: KOTRBA, LINDA
Address: 618 HOWARD CREEK LANE
City-St-Zip: STUART, FL 34994

Title: P () Delete
Name: HLAVIN, JOSEPH
Address: 4216 CONWAY CT
City-St-Zip: COLLEGE STATION, TX 77845

Title: PE () Delete
Name: HILL, BRENDA
Address: 98-18101 KASHUMANU ST
City-St-Zip: PEARL CITY, HI 96782

Title: ST () Delete
Name: BARONE, DEAN
Address: 23 KNIGHTSBRIDGE PLACE
City-St-Zip: JACKSON, NJ 08527

Title: D () Delete
Name: SCOTT, TEL
Address: 13804 112TH AVE CT E
City-St-Zip: PUYALLUP, WA 98374

Title: D () Delete
Name: STEYSKAL, CHRISTOPHER
Address: 3514 LAMBETH CT
City-St-Zip: WILMINGTON, NC 28409

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ED (X) Change () Addition
Name: KOTRBA, LINDA
Address: 618 HOWARD CREEK LANE
City-St-Zip: STUART, FL 34994

Title: PRES (X) Change () Addition
Name: HLAVIN, JOSEPH
Address: 2457 NEWARK CIRCLE
City-St-Zip: COLLEGE STATION, TX 77845

Title: PE (X) Change () Addition
Name: HILL, BRENDA
Address: 98-1810J KASHUMANU ST
City-St-Zip: PEARL CITY, HI 96782

Title: S/T (X) Change () Addition
Name: BARONE, DEAN
Address: 23 KNIGHTSBRIDGE PLACE
City-St-Zip: JACKSON, NJ 08527

Title: D (X) Change () Addition
Name: SCOTT, TEI
Address: 13804 112TH AVE CT E
City-St-Zip: PUYALLUP, WA 98374

Title: D (X) Change () Addition
Name: BEARDSLEY, JOSHUA
Address: 7506 THORN CREEK LANE
City-St-Zip: TEGA CAY, SC 29708

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 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: LINDA KOTRBA

Electronic Signature of Signing Officer or Director

ED

01/08/2008

Date