

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000003023

FILED  
Apr 02, 2010  
Secretary of State

**Entity Name:** NEURO CHALLENGE FOUNDATION, INC.

**Current Principal Place of Business:**

5880 RAND BLVD  
209  
SARASOTA, FL 34236

**New Principal Place of Business:**

5880 RAND BLVD  
SARASOTA, FL 34236

**Current Mailing Address:**

4411 BEE RIDGE ROAD  
246  
SARASOTA, FL 34233

**New Mailing Address:**

4411 BEE RIDGE ROAD  
SUITE 246  
SARASOTA, FL 34233

**FEI Number:** 26-2311656

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SUTHERLAND, DOREEN  
7921 KERYN HAMMOCK CT  
SARASOTA, FL 34240 US

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

SUTHERLAND, DOREEN  
4411 BEE RIDGE ROAD  
SUITE 246  
SARASOTA, FL 34233 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:

04/02/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: SUTHERLAND, DOREEN  
Address: 5880 RAND BLVD  
City-St-Zip: SARASOTA, FL 34233

Title: D  
Name: PENXA, CARL  
Address: 120 LOBLOLY LANE  
City-St-Zip: NOKOMIS, FL 34275

Title: D  
Name: STEVENS, RICHARD  
Address: 3091 HIGHLANDS RIDGE DRIVE  
City-St-Zip: SARASOTA, FL 34239

Title: D  
Name: DAVENPORT, PAULA  
Address: 502 E. MACEWEN DRIVE  
City-St-Zip: OSPREY, FL 34299

Title: D  
Name: GORDON, CHERYL  
Address: 240 S. PINEAPPLE AVE 10TH FLOOR  
City-St-Zip: SARASOTA, FL 34236

Title: D  
Name: LANDAUER, JANICE  
Address: 3443 HADFIELD GREENE  
City-St-Zip: SARASOTA, FL 34235

I hereby 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 all other like empowered.

SIGNATURE: DOREEN SUTHERLAND

D

04/02/2010

Electronic Signature of Signing Officer or Director

Date