

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000000821

FILED
Feb 02, 2010
Secretary of State

Entity Name: NEUROLOGIQUE FOUNDATION, INC.

Current Principal Place of Business:

221 STELLAR COURT
PONTE VEDRA BEACH, FL 320824040

New Principal Place of Business:

6 FAIRFIELD BLVD
11
PONTE VEDRA BEACH, FL 320824627 US

Current Mailing Address:

221 STELLAR COURT
PONTE VEDRA BEACH, FL 320824040

New Mailing Address:

6 FAIRFIELD BLVD
11
PONTE VEDRA BEACH, FL 320824627 US

FEI Number: 26-4190339

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROBLES, SONSOLES
221 STELLAR COURT
PONTE VEDRA BEACH, FL 320824040 US

Name and Address of New Registered Agent:

ROBLES, SONSOLES
6 FAIRFIELD BLVD
11
PONTE VEDRA BEACH, FL 320824627 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: SONSOLES ROBLES

02/02/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: SALIE, ELIZABETH
Address: 73 BROOKHAVEN TR
City-St-Zip: WETUMPKA, AL 33036

Title: D
Name: MOORE, YAHAIRA
Address: RT 2 BOX 443
City-St-Zip: LAKELAND, GA 31635

Title: D
Name: MCQUAIN, YUMIRA
Address: 4403 BRIDGEVILLAGE DR
City-St-Zip: SPRING, TX 77373

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: YAHAIRA MOORE

D

02/02/2010

Electronic Signature of Signing Officer or Director

Date