

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000006586

FILED  
Apr 20, 2011  
Secretary of State

**Entity Name:** THE BRAIN FOUNDATION OF FLORIDA, INC.

**Current Principal Place of Business:**

9152 POINT CYPRESS DR  
ORLANDO, FL 32836

**New Principal Place of Business:**

**Current Mailing Address:**

9152 POINT CYPRESS DR  
ORLANDO, FL 32836

**New Mailing Address:**

**FEI Number:** 27-0533943

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBB, PAMELA M ESQ  
1311 WINTER GARDEN-VINELAND RD  
WINTER GARDEN, FL 34787 US

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

WILENSKY, RONALD J  
9152 POINT CYPRESS DRIVE  
ORLANDO, FL 32836 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: RONALD J. WILENSKY

04/20/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: WILENSKY, RONALD J  
Address: 9152 POINT CYPRESS DR  
City-St-Zip: ORLANDO, FL 32836

Title: D  
Name: WILENSKY, LINDA  
Address: 9152 POINT CYPRESS DR  
City-St-Zip: ORLANDO, FL 32836

Title: D  
Name: WOOD, DON  
Address: 2803 MIDSUMMER DRIVE  
City-St-Zip: WINDEREMERE, FL 34786

Title: D  
Name: DORMAN, RAY  
Address: 5639 MASTERS BOULEVARD  
City-St-Zip: WINDEREMERE, FL 32819

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: RONALD J. WILENSKY

D

04/20/2011

Electronic Signature of Signing Officer or Director

Date