

**2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 12, 2011  
Secretary of State**

DOCUMENT# N09000008283

Entity Name: TBI CENTERS INC

**Current Principal Place of Business:**

2065 NW 15TH PLACE  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

**Current Mailing Address:**

2065 NW 15TH PLACE  
DELRAY BEACH, FL 33445

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

PRICE, DAVID J DR  
2065 NW 15TH PLACE  
DELRAY BEACH, FL 33445      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  
Name: PRICE, DAVID J DR.  
Address: 2065 NW 15TH PLACE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: D  
Name: PRICE, AMY I DR.  
Address: 2065 NW 15TH PLACE  
City-St-Zip: DELRAY BEACH, FL 33445

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: DR DJ PRICE

D

02/12/2011

Electronic Signature of Signing Officer or Director

Date