

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000004567

FILED  
Apr 27, 2012  
Secretary of State

**Entity Name:** INSTITUTE FOR COGNITIVE INNOVATION, INC.

**Current Principal Place of Business:**

10650 SW 137TH ST  
MIAMI, FL 331766628

**New Principal Place of Business:**

**Current Mailing Address:**

10650 SW 137TH ST  
MIAMI, FL 331766628

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

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

WHITE, DANIEL T ESQ  
3810 NW 39TH AVE  
GAINESVILLE, FL 33606 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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: YOURIST, JAY E  
Address: 10650 SW 137TH ST  
City-St-Zip: MIAMI, FL 331766628 US

Title: D  
Name: SOMERS, DEBBIE  
Address: 10065 CARILLON DR  
City-St-Zip: ELLICOTT CITY, MD 21042 US

Title: D  
Name: WHITE, DANIEL T ESQ  
Address: 3810 NW 39TH AVE  
City-St-Zip: GAINESVILLE, FL 33606 US

Title: D  
Name: ELIAS, EILEEN P  
Address: PO BOX 625 42 PACKET LANDING  
City-St-Zip: WEST BARNSTABLE, MA 02668 US

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: JAY E. YOURIST

D

04/27/2012

Electronic Signature of Signing Officer or Director

Date