

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42231

FILED
Feb 19, 2011
Secretary of State

Entity Name: FLORIDA ASSOCIATION FOR THE STUDY OF HEADACHE, INC.

Current Principal Place of Business:

4521 PGA BLVD
SUITE #165
PALM BEACH GARDENS, FL 33418 US

New Principal Place of Business:

Current Mailing Address:

4521 PGA BLVD
SUITE #165
PALM BEACH GARDENS, FL 33418 US

New Mailing Address:

FEI Number: 65-0341482

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSELLI, DAN
MCGILL, ROSELLI, AYALA & HOPPMAN PA
2135 S CONGRESS AVE STE 1C
PALM SPRINGS, FL 33406 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: PT
Name: WINNER, PAUL K D.O.
Address: 4521 PGA BLVD, #165
City-St-Zip: PALM BCH GARDENS, FL 33418

Title: ST
Name: SADOWSKY, CARL M.D.
Address: 4521 PGA BLVD, STE 165
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

Title: TT
Name: MARTINEZ, WALTER MD
Address: 4521 PGA BLVD, SUITE 165
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: T
Name: CAPOBIANCO, DAVID MD
Address: 4521 PGA BLVD, #165
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: PAUL K. WINNER, D.O.

PT

02/19/2011

Electronic Signature of Signing Officer or Director

Date