

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48574

FILED  
Apr 28, 2009  
Secretary of State

**Entity Name:** SPINAL CORD GROUP OF S.W. FLORIDA, INC.

**Current Principal Place of Business:**

2321 BRUNER LN.  
FT MYERS, FL 33912 US

**New Principal Place of Business:**

**Current Mailing Address:**

2321 BRUNER LN.  
FT MYERS, FL 33912 US

**New Mailing Address:**

**FEI Number:** 65-0332962      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

TURNER, LYN M  
114 SOUTH ROAD  
FORT MYERS, FL 33907 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: P ( ) Delete  
Name: TURNER, LYN M  
Address: 114 SOUTH ROAD  
City-St-Zip: FORT MYERS, FL 33907 US

Title: VP ( ) Delete  
Name: BROOKS, BERNARD  
Address: 2321 BRUNER LN.  
City-St-Zip: FORT MYERS, FL 33912 US

Title: S ( ) Delete  
Name: GOLDWATER, SCOTT  
Address: 2321 BRUNER LN.  
City-St-Zip: FORT MYERS, FL 33912 US

Title: T ( ) Delete  
Name: MCLEAN, MARC  
Address: 1953 SE 36TH ST.  
City-St-Zip: CAPE CORAL, FL 33904 US

Title: D ( ) Delete  
Name: GRANT, VON  
Address: 2321 BRUNER LN.  
City-St-Zip: FORT MYERS, FL 33912 US

Title: D ( ) Delete  
Name: SHIMKO, BOB  
Address: 17529 LAUREL VALLEY ROAD  
City-St-Zip: FORT MYERS, FL 33912 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: LYN M. TURNER

P

04/28/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date