2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2009
Secretary of State

DOCUMENT# N97000005286

Entity Name: SCOLIOSIS ASSOCIATION, INC.

Current Principal Place of Business:

2500 NORTH MILITARY TRAIL-#301
CRYSTAL CORPORATE CENTER
BOCA RATON, FL 33421

New Principal Place of Business:

2500 NORTH MILITARY TRAIL-#301
CRYSTAL CORPORATE CENTER
BOCA RATON, FL 33431

Current Mailing Address:

P.O. BOX 811705
BOCA RATON, FL 334811705

New Mailing Address:

P.O. BOX 811705
BOCA RATON, FL 33481

FEI Number: 51-0189453 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SACKS, STANLEY E
4881 N.W. 5TH LANE
BOCA RATON, FL 33431 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: PD ( ) Delete
Name: STANLEY E SACKS,
Address: 4881 NW 5TH LN
City-St-Zip: BOCA RATON, FL 33431

Title: VPD ( ) Delete
Name: JANICE T SACKS,
Address: 4881 NW 5TH LN
City-St-Zip: BOCA RATON, FL 33431

Title: D ( ) Delete
Name: LIPIN, NORMAN
Address: 22736 LA QUINTA DRIVE
City-St-Zip: MISSION VIEJO, CA 926911914

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:

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: STANLEY E. SACKS PD 03/18/2009

Electronic Signature of Signing Officer or Director — Date