

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000072329

FILED
Apr 28, 2011
Secretary of State

Entity Name: NATIONAL TRAINING CENTER SPORTS MEDICINE INSTITUTE, P.A.

Current Principal Place of Business:

1101 CITRUS TOWER BLVD
CLERMONT, FL 34711

New Principal Place of Business:

1925 DON WICKHAM DRIVE
CLERMONT, FL 34711

Current Mailing Address:

1101 CITRUS TOWER BLVD
CLERMONT, FL 34711

New Mailing Address:

1925 DON WICKHAM DRIVE
CLERMONT, FL 34711

FEI Number: 59-3732981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAY, JAMES M MD
1101 CITRUS TOWER BLVD.
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

RAY, JAMES M MD
1925 DON WICKHAM DRIVE
CLERMONT, FL 34711 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

04/28/2011

Date

OFFICERS AND DIRECTORS:

Title: DPST
Name: RAY, JAMES M MD
Address: 1101 CITRUS TOWER BLVD.
City-St-Zip: CLERMONT, FL 34711

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES M. RAY

PRES

04/28/2011

Electronic Signature of Signing Officer or Director

Date