

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080505

FILED
Mar 25, 2011
Secretary of State

Entity Name: ACADEMY OF NEUROSURGICAL PHYSICIANS, INC.

Current Principal Place of Business:

1201 SOUTH ANDREWS AVENUE
200
FORT LAUDERDALE, FL 33316

New Principal Place of Business:

7710 NW 71ST COURT
SUITE 205
TAMARAC, FL 33321

Current Mailing Address:

1201 SOUTH ANDREWS AVENUE
200
FORT LAUDERDALE, FL 33316

New Mailing Address:

7710 NW 71ST COURT
SUITE 205
TAMARAC, FL 33321

FEI Number: 56-2283491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, ANTHONY J
1201 SOUTH ANDREWS AVENUE
200
FORT LAUDERDALE, FL 33316 US

Name and Address of New Registered Agent:

HALL, ANTHONY J
7710 NW 71ST COURT
SUITE 205
TAMARAC, FL 33321 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

03/25/2011

Date

OFFICERS AND DIRECTORS:

Title: PST
Name: HALL, ANTHONY J
Address: 7710 NW 71ST COURT, SUITE 205
City-St-Zip: TAMARAC, FL 33321 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANTHONY J HALL

PST

03/25/2011

Electronic Signature of Signing Officer or Director

Date