2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000117992

4325 SUN LAKE BLVD SUITE 104

SEBRING, FL 33872

Address:

City-St-Zip:

Entity Name: NEUROLOGY ASSOCIATES OF SEBRING, P.A.

FILED Jan 19, 2009 Secretary of State

Current P	rincipal Place	e of Business:	New Principal Place of Business:		
4325 SUN STE 104	"N LAKE BLVI	D.			
	, FL 33872				
Current Mailing Address:			New Mailing Address	New Mailing Address:	
4325 SUN STE 104	"N LAKE BLVI	D.			
	, FL 33872				
FEI Number	: 27-0035306	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
4325 SUN SEBRING The above	named entity) US	e purpose of changing its registered	l office or registered agent, or both,	
	e of Florida.				
SIGNATU					
	Electro	nic Signature of Registered A	gent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	RAMKISSOON) Delete , BRIDGLAL M.D. AKE BLVD STE 104 33872	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	S (COLON, MARL) Delete Y	Title: Name:	() Change () Addition	

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

SIGNATURE: BRIDGLAL RAMKISSOON PRES 01/19/2009