

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000013546

FILED
Apr 30, 2008
Secretary of State

Entity Name: CENTRAL FLORIDA PAIN & SPINE INSTITUTE, P.A.

Current Principal Place of Business:

725 W GRANADA BLVD
UNIT 22
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 731618
ORMOND BEACH, FL 321731618 US

New Mailing Address:

FEI Number: 13-4236113

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAUERBERG, ERIC M
200 VILLAGE SQUARE CROSSING
SUITE 102
PALM BEACH GARDENS, FL 33410 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: YANAMADULA, DINASH K MD
Address: 725 W GRANADA BLVD UNIT 22
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: CS () Change (X) Addition
Name: CANNON, ROCHELLE R
Address: 725 W GRANADA BLVD UNIT 22
City-St-Zip: ORMOND BEACH, FL 32174

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: DINASH K YANAMADULA MD

PSTD

04/30/2008

Electronic Signature of Signing Officer or Director

Date