2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2011
Secretary of State

DOCUMENT# P03000017108

Entity Name: CHARLOTTE PAIN CENTER, INC.

Current Principal Place of Business:

3109 TAMIAMI TRAIL
UNIT 3
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

3109 TAMIAMI TRAIL
UNIT 3
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 41-2079619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HARRIS, NANCY
32 TORRINGTON STREET
PORT CHARLOTTE, FL 33954 US

Name and Address of New Registered Agent:

HARRIS, NANCY J
32 TORRINGTON STREET
PORT CHARLOTTE, FL 33954 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: NANCY JEAN HARRIS 03/16/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: HARRIS, NANCY J
Address: 32 TORRINGTON STREET
City-St-Zip: PORT CHATLOTTE, FL 33954

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: NANCY JEAN HARRIS PRES 03/16/2011
Electronic Signature of Signing Officer or Director Date