2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000126616

Entity Name: MSPB SEPARATE ACCOUNT, INC.

FILED Feb 21, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
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5700 LAKE WORTH ROAD SUITE 204 LAKE WORTH, FL 33463

Current Mailing Address: New Mailing Address:

5700 LAKE WORTH RD STE 204 LAKE WORTH, FL 33463

FEI Number: 20-0370181 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FERNANDEZ, MANUEL A 5700 LAKE WORTH ROAD SUITE 204 LAKE WORTH, FL 33463 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.

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SIGNATURE: Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D

Name: KRASNER, STEPHEN E M.D. Address: 5401 S CONGRESS AVE STE 102

City-St-Zip: ATLANTIS, FL 33462

Title: V/D

Name: GOLDSTEIN, MARK M.D.
Address: 140 JFK DRIVE
City-St-Zip: ATLANTIS, FL 33462

Title: S/D

Name: ROSENFIELD, THOMAS M.D. Address: 5401 SOUTH CONGRESS AVE, #211

City-St-Zip: ATLANTIS, FL 33462

Title: T/D

Name: SANCHEZ, CARLOS M.D.

Address: 5401 SOUTH CONGRESS AVE, #204

City-St-Zip: ATLANTIS, FL 33462

Title: CEO

Name: FERNANDEZ, MANUEL A
Address: 5400 LAKE WORTH RD #204
City-St-Zip: LAKE WORTH, FL 33463

Title:

Name: HERON, JAMES M.D.

Address: 5401 SOUTH CONGRESS AVE, #218

City-St-Zip: ATLANTIS, FL 33462

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: STEPHEN E KRASNER P 02/21/2011