

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000015319

FILED
Aug 08, 2008
Secretary of State

Entity Name: SPACE COAST NEUROLOGY & PAIN MANAGEMENT, P.A.

Current Principal Place of Business:

4961 BABCOCK ST. N.E.
SUITE # 7
PALM BAY, FL 32905

New Principal Place of Business:

Current Mailing Address:

PO BOX 500898
MALABAR, FL 32950

New Mailing Address:

FEI Number: 54-2141437

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEC CONSULTANTS, INC.
1515 INDIAN RIVER BOULEVARD
SUITE A210
VERO BEACH, FL 329607103 US

Name and Address of New Registered Agent:

LOIS A FREDRICKS, INC
1501 R J CONLAN BLVD
SUITE 170
PALM BAY, FL 32905 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: LOIS A FREDRICKS

08/08/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HASHMI, MASOOD
Address: 4982 FOURTH LANE
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
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: MASOOD HASHMI

PRES

08/08/2008

Electronic Signature of Signing Officer or Director

Date