

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000108502

FILED
Apr 04, 2011
Secretary of State

Entity Name: HILLSBORO PAIN & REHAB CENTER, INC.

Current Principal Place of Business:

2247 W HILLSBORO BLVD
DEERFIELD BCH, FL 33442

New Principal Place of Business:

Current Mailing Address:

2247 W HILLSBORO BLVD
DEERFIELD BCH, FL 33442

New Mailing Address:

FEI Number: 03-0544517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDEBROOK, WILLIAM F DR
2247 W HILLSBORO BLVD
DEERFIELD BCH, FL 33442 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

OFFICERS AND DIRECTORS:

Title: P
Name: VANDERBROOK, WILLIAM
Address: 1098 WEST ROYAL PALM RD
City-St-Zip: BOCA RATON, FL 33486

Title: V
Name: VANDERBROOK, JESSICA
Address: 1098 WEST ROYAL PALM RD
City-St-Zip: BOCA RATON, FL 33486

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: DR. WILLIAM VANDERBROOK

P

04/04/2011

Electronic Signature of Signing Officer or Director

Date