## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025639

Entity Name: SPINAL AID CENTERS OF AMERICA INC

FILED Jun 16, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

29750 US HWY 19 371 PALM ISLAND SE CLEARWATER, FL 33761 CLEARWATER, FL 33767

Current Mailing Address: New Mailing Address:

29750 US HWY 19 371 PALM ISLAND SE 300 CLEARWATER, FL 33767

FEI Number: 20-2350972 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

LIBERTI, FRANK
29750 US HWY 19
371 PALM ISLAND SE
300
CLEARWATER, FL 33761 US

CLEARWATER, FL 33767 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: ROBIN CUAHONTE 06/16/2011

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: PRES

 Name:
 LIBERTI, FRANK

 Address:
 371 PALM ISLAND SE

 City-St-Zip:
 CLEARWATER, FL 33767

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: FRANK LIBERTI PRES 06/16/2011