

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000006277

FILED  
Jan 13, 2012  
Secretary of State

**Entity Name:** FLORIDA SPINE INSTITUTE OF OKEECHOBEE, INC

**Current Principal Place of Business:**

1140 S. PARROTT AVENUE  
OKEECHOBEE, FL 34974

**New Principal Place of Business:**

**Current Mailing Address:**

1140 S. PARROTT AVENUE  
OKEECHOBEE, FL 34974

**New Mailing Address:**

FEI Number: 20-8254563

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCARNECCHIA, ROBERT  
1140 S. PARROTT AVENUE  
OKEECHOBEE, FL 34974 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: SCARNECCHIA, ROBERT  
Address: 1140 S. PARROTT AVENUE  
City-St-Zip: OKEECHOBEE, FL 34974

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: ROBERT W. SCARNECCHIA

DR.

01/13/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date