2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 14, 2010
Secretary of State

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Entity Name: FLORIDA REGIONAL PAIN MANAGEMENT, P.A.

Current Principal Place of Business:

9931 CHELSEA LAKE ROAD
JACKSONVILLE, FL 32256

New Principal Place of Business:

8259 BAYBERRY ROAD
JACKSONVILLE, FL 32256

Current Mailing Address:

9931 CHELSEA LAKE ROAD
JACKSONVILLE, FL 32256

New Mailing Address:

8259 BAYBERRY ROAD
JACKSONVILLE, FL 32256

FEI Number: 30-0458901 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MANOHAR, SHONITH
9931 CHELSEA LAKE ROAD
JACKSONVILLE, FL 32256 US

Name and Address of New Registered Agent:

MANOHAR, SHONITH
8259 BAYBERRY ROAD
JACKSONVILLE, FL 32256 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: SHONITH MANOHAR 07/14/2010
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D
Name: MANOHAR, SHONITH
Address: 8259 BAYBERRY ROAD
City-St-Zip: JACKSONVILLE, FL 32256

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: SHONITH MANOHAR PRES 07/14/2010
Electronic Signature of Signing Officer or Director Date