

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000033444

FILED
May 01, 2010
Secretary of State

Entity Name: PALM COAST SPINE & REHAB INC

Current Principal Place of Business:

84 PINNACLES DRIVE
BLDG A, SUITE 300
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

84 PINNACLES DRIVE
BLDG A, SUITE 300
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 26-4671900

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DEMCHAK, MICHAEL
84 PINNACLES DRIVE
BLDG A, SUITE 300
PALM COAST, FL 32164 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

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: P
Name: DEMCHAK, MICHAEL
Address: 84 PINNACLES DRIVE, BLDG A, SUITE 300
City-St-Zip: PALM COAST, FL 32164

Title: VP
Name: DEMCHAK, MARIA
Address: 84 PINNACLES DRIVE, BLDG A, SUITE 300
City-St-Zip: PALM COAST, FL 32164

Title: S
Name: DEMCHAK, MICHAEL P
Address: 84 PINNACLES DRIVE, BLDG A, SUITE 300
City-St-Zip: PALM COAST, FL 32164

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: MICHAEL DEMCHAK

MGR

05/01/2010

Electronic Signature of Signing Officer or Director

Date