## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P11000107495

Entity Name: NEUROLOGY ASSOCIATES OF STARKE INC

FILED Feb 21, 2012 Secretary of State

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

107 EDWARDS RD SUITE F STARKE, FL 32091

Current Mailing Address: New Mailing Address:

7835 CHASE MEADOWS DR 5000-18 US HWY 17 S, #65
JACKSONVILLE, FL 32256 US FLEMING ISLAND, FL 32003 US

FEI Number: 45-4007344 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

DECERCE, JOHN MD
7835 CHASE MEADOWS DR
JACKSONVILLE, FL 32256 US
DECERCE, JOHN MD
107 EDWARDS RD
SUITE F
STARKE, FL 32091 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: 02/21/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

 Name:
 DECERCE, JOHN MD

 Address:
 5000-18 US HWY 17 S, #65

 City-St-Zip:
 FLEMING ISLAND, FL 32003 US

Title: S/T

 Name:
 DECERCE, HELEN E

 Address:
 5000-18 US HWY 17 S, #65

 City-St-Zip:
 FLEMING ISLAND, FL 32003

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: JOHN DECERCE P 02/21/2012