

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000047343

Entity Name: SUNCOAST SPINAL CENTERS I, INC.

FILED
Mar 29, 2007
Secretary of State

Current Principal Place of Business:

24945 US HWY 19 N
CLEARWATER, FL 33763

New Principal Place of Business:

Current Mailing Address:

24945 US HWY 19 N.
CLEARWATER, FL 33763 US

New Mailing Address:

FEI Number: 59-3368551

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAREN J. WELSTEIN
24945 US HWY 19 N.
CLEARWATER, FL 33763 US

Name and Address of New Registered Agent:

KAREN J. WOLSTEIN
24945 US HWY 19 N.
CLEARWATER, FL 33763 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: KAREN J. WOLSTEIN

03/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOLSTEIN, BRIAN G D.C.
Address: 24945 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33763

Title: VP () Delete
Name: WOLSTEIN, KAREN
Address: 24945 US HWY 19 N
City-St-Zip: CLEARWATER, FL 33763

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BRIAN G. WOLSTEIN

D

03/29/2007

Electronic Signature of Signing Officer or Director

Date