2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000015576

Entity Name: NEUROSURGICAL SPINE CENTER, INC.

Current Principal Place of Business:	**New Principal Place of Business:**
11906 OAKTRAIL WAY PORT RICHEY, FL 34668 US	

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 5849 HUDSON, FL 34668 US	

FEI Number: 59-3384451   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
TORRENCE, ALFRED W JR 6645 RIDGE ROAD PORT RICHEY, FL 34668 US	GIANNAKOPOULOS, GEORGE 11906 OAK TRAIL WAY PORT RICHEY, FL 34668 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: GEORGE GIANNAKOPOULOS   05/04/2006

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 (X).

OFFICERS AND DIRECTORS:	**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**
Title: P ( ) Delete Name: GIANNAKOPOULOS, GEORGE Address: 11906 OAK TRAIL WAY City-St-Zip: PORT RICHEY, FL 34668	Title: PST (X) Change ( ) Addition Name: GIANNAKOPOULOS, GEORGE Address: 11906 OAK TRAIL WAY City-St-Zip: PORT RICHEY, FL 34668

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: GEORGE GIANNAKOPOULOS   PRES   05/04/2006

Electronic Signature of Signing Officer or Director   Date