

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000040140

FILED
Jan 06, 2011
Secretary of State

Entity Name: NEUROLOGICAL SPECIALTIES NEUROLOGY, P.A.

Current Principal Place of Business:

2816 W. VIRGINIA AVE.
TAMPA, FL 33607

New Principal Place of Business:

2816 WEST VIRGINIA AVE.
TAMPA, FL 33607

Current Mailing Address:

2816 W. VIRGINIA AVE.
TAMPA, FL 33607

New Mailing Address:

2816 WEST VIRGINIA AVE.
TAMPA, FL 33607

FEI Number: 59-3447630

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, THOMAS M MD
2816 W. VIRGINIA AVE.
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

NEWMAN, THOMAS M MD
2816 WEST VIRGINIA AVE.
TAMPA, FL 33607 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:

Electronic Signature of Registered Agent

01/06/2011

Date

OFFICERS AND DIRECTORS:

Title: D
Name: NEWMAN, THOMAS M
Address: 2816 WEST VIRGINIA AVE.
City-St-Zip: TAMPA, FL 33607

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: THOMAS M NEWMAN, MD

RA

01/06/2011

Electronic Signature of Signing Officer or Director

Date