

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000077547

FILED  
Apr 19, 2004  
Secretary of State

Entity Name: ADVANCED COMFORT PAIN CONTROL, INC.

## Current Principal Place of Business:

1501 RIDGEWOOD AVE  
HOLLY HILL, FL 32117

## New Principal Place of Business:

533 NORTH NOVA ROAD  
SUITE 102  
ORMOND BEACH, FL 32174

## Current Mailing Address:

PO BOX 1508  
VOULSIA, FL 32175

## New Mailing Address:

PO BOX 1508  
ORMOND BEACH, FL 32175

FEI Number: 59-3459925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRANCOEUR, JERI H  
1 SHARON TERR  
ORMOND BEACH, FL 32174 US

## Name and Address of New Registered Agent:

FRANCOEUR, JERI H  
1 SHARON TERRACE  
ORMOND BEACH, FL 32174 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:

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DP ( ) Delete  
Name: FRANCOEUR, JERI H  
Address: 1 SHARON TERRACE  
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP ( ) Delete  
Name: FRANCOEUR, PAUL R  
Address: 1 SHARON TERRACE  
City-St-Zip: ORMOND BEACH, FL 32174

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change ( ) Addition  
Name: FRANCOEUR, JERI H  
Address: 1 SHARON TERRACE  
City-St-Zip: ORMOND BEACH, FL 32174

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 Section 119.07(3)(i), 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: JERI H FRANCOEUR

CEO

04/19/2004

Electronic Signature of Signing Officer or Director

Date