

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S38813

FILED
Jan 27, 2009
Secretary of State

Entity Name: NEURODIMENSION, INCORPORATED

Current Principal Place of Business:

3701 NW 40TH TERRACE
SUITE 1
GAINESVILLE, FL 32606 US

New Principal Place of Business:

Current Mailing Address:

3701 NW 40TH TERRACE
SUITE 1
GAINESVILLE, FL 32606 US

New Mailing Address:

FEI Number: 59-3065185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REID, STEVEN A.
314 NE 4TH AVENUE
GAINESVILLE, FL 32601 US

Name and Address of New Registered Agent:

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

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REID, STEVEN A.,
Address: 314 NE 4TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601 US

Title: D () Delete
Name: WOOTEN, DANIEL M.,
Address: 1014 NW 104TH TERRACE
City-St-Zip: GAINESVILLE, FL 32606 US

Title: D () Delete
Name: LYNN, GARY W V
Address: 1162 EQUESTRIAN DRIVE
City-St-Zip: SOUTH LYON, MI 48178 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: GENIESSE, JAMES G D
Address: 5425 NW 15 PLACE
City-St-Zip: GAINESVILLE, FL 32605 US

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

I hereby certify that the information supplied with this filing does not qualify 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: JAMES GENIESSE

D

01/27/2009

Electronic Signature of Signing Officer or Director

Date