

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S60282

FILED
Apr 09, 2007
Secretary of State

Entity Name: BREVARD ARTHRITIS CENTER, INC.

Current Principal Place of Business:

375 SOUTH COURTENAY PARKWAY
MERRITT ISLAND, FL 32952

New Principal Place of Business:

375 SOUTH COURTENAY PARKWAY
#3
MERRITT ISLAND, FL 32952

Current Mailing Address:

375 SOUTH COURTENAY PARKWAY
MERRITT ISLAND, FL 32952

New Mailing Address:

375 SOUTH COURTENAY PARKWAY
#3
MERRITT ISLAND, FL 32952

FEI Number: 59-3048872

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILBURN, BRUCE MCNEIL
375 SOUTH COURTENAY PARKWAY
MERRITT ISLAND, FL 32952 US

Name and Address of New Registered Agent:

MILBURN, BRUCE MCNEIL
375 SOUTH COURTENAY PARKWAY
#3
MERRITT ISLAND, FL 32952 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:

04/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILBURN, BRUCE MCNEIL, L
Address: 375 S. COURTENAY PKWY
City-St-Zip: MERRITT ISLAND, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: MILBURN, BRUCE MCNEIL

D

04/09/2007

Electronic Signature of Signing Officer or Director

Date