2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V48199

City-St-Zip:

VERO BEACH, FL 32963

Entity Name: FLORIDA BRACING CENTERS, INC.

FILED Feb 18, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of	New Principal Place of Business:	
1201 N FEDERAL HIGHWAY #3C					
FT. LAUDE	RDALE, FL 3	3304			
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
1201 N FEDERAL HIGHWAY					
#3C FT. LAUDE	RDALE, FL 3	3304			
FEI Number:	65-0340218	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
MATTERN, JAMES 1941 CLUB DR VERO BEACH, FL 32963 US			MATTERN, JAMES 1201 N. FEDERAL HWY FT LAUDERDALE, FL 3		
The above in the State		ubmits this statement for the pu	urpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				02/18/2008	
Electronic Signature of Registered Agent			nt	Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () MATTERN, JAM 1941 CLUB DR VERO BEACH, I		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	V (X) MCCONNELL, J 715 SANDFLY L VERO BEACH, I	ANE	Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	T () EDWARDS, RO 536 POINT LN VERO BEACH, I		Title: (Name: Address: City-St-Zip:) Change () Addition	
Title: Name: Address:	S () FENNELL, TOD 979 BEACHLAN		Title: (Name: Address:) Change ()Addition	

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.

City-St-Zip:

SIGNATURE: JAMES MATTERN Ρ 02/18/2008