

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009297

Entity Name: BRAIN DISORDER SUPPORT FOUNDATION, INC.

Current Principal Place of Business:

353 JUNIPER LAKE RD.
DEFUNIAK SPRINGS, FL 32433

Current Mailing Address:

353 JUNIPER LAKE RD.
DEFUNIAK SPRINGS, FL 32433

FEI Number: 80-0113224

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DAVIS, MARK D
694 BALDWIN AVE., STE. 1
DEFUNIAK SPRINGS, FL 32435 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

Date

Officer/Director Detail :

Title CEO / CENTER ADMINISTRATOR
Name COURSEY, HILDA R
Address 353 JUNIPER LAKE RD
City-State-Zip: DEFUNIAK SPRINGS FL 32433

Title DIRECTOR
Name ORLOSKY, SALLY
Address 353 JUNIPER LAKE RD.
City-State-Zip: DEFUNIAK SPRINGS FL 32433

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HILDA R. COURSEY

CEO / CENTER
ADMINISTRATOR

04/08/2013

Electronic Signature of Signing Officer/Director Detail

Date