Entity Name: THE BRAIN INJURY CONNECTION, INC.			Secretary of State 1231797865CC	
	ncipal Place of Business:		1231797	00500
3 VINE AVE NE FORT WALTO	= N BEACH, FL 32548			
Current Mai	ling Address:			
3 VINE AVE FORT WALT	NE FON BEACH, FL 32548 US			
FEI Number: 59-3557141			Certificate of Status Desi	red: No
Name and A	Address of Current Registered Agent:			
BAYER, ZACH 3 VINE AVE NE FORT WALTO				
The above name	d entity submits this statement for the purpose of changing its	registered office or regis	tered agent, or both, in the State of Flor	ida.
SIGNATURE	E: ZACHARY C. BAYER			03/11/2024
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	D	Title	DIRECTOR	
Name	BAYER, MARTHA C	Name	HUBBARD, JENNIFER MS	
Address	257 W. MIRACLE STRIP	Address	43 PELHAM ROAD	
City-State-Zip:	MARY ESTHER FL 32569	City-State-Zip:	FT. WALTON BEACH FL 32547	
Title				7
	DIRECTOR	Title	OFFICER	7
Name	DIRECTOR BAYER, ZACHARY C DR.	Title Name	OFFICER BAYER, CORISSA PHD	7

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: ZACHARY BAYER

3 VINE AVENUE

City-State-Zip: FT. WALTON BEACH FL 32548

Address

Address

03/11/2024

Electronic Signature of Signing Officer/Director Detail

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9800006990

FILED Mar 11, 2024 Secretary of State

DIRECTOR

203 HOLLYWOOD BLVD NE

City-State-Zip: FORT WALTON BEACH FL 32548

Date