### 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000091176

Entity Name: NEUROTECHNOLOGIES OF THE TREASURE COAST, INC.

**FILED** Apr 16, 2015 **Secretary of State** CC9399640186

# **Current Principal Place of Business:**

145 NW CENTRAL PARK PLAZA SUITE 104 PORT ST. LUCIE, FL 34986

# **Current Mailing Address:**

432 NW CANTERBURY CT. PORT ST. LUCIE, FL 34983

FEI Number: 27-1260207 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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 Title **TREASURER** 

EISELE. JEROME PSR Name Name EISELE, LORETTA H

Address 432 NW CANTERBURY CT. Address 145 NW CENTRAL PARK PLAZA

SUITE 104

City-State-Zip: PORT ST. LUCIE FL 34983 City-State-Zip: PORT ST. LUCIE FL 34986

Title **PRESIDENT** 

Title **DIRECTOR** Name EISELE, JEROME P

Name EISELE, LORETTA H Address 145 NW CENTRAL PARK PLAZA

Address 145 NW CENTRAL PARK PLAZA SUITE 104

SUITE 104

City-State-Zip: PORT ST. LUCIE FL 34986 PORT ST. LUCIE FL 34986 City-State-Zip:

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

SIGNATURE: JEROME P. EISELE SR.

**PRESIDENT** 

04/16/2015