2021 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION

Commonwealth of Virginia
State Corporation Commission
Office of the Clerk
Entity ID: 05662499
Filing Number: 2110063736520
Filing Date/Time: 10/06/2021 11:41 AM
Effective Date/Time: 10/06/2021 11:44 AM

1.	CORPORATION NAME
	Highland Neurology, Inc.

DUE DATE: 010/31/21

2. VA REGISTERED AGENT NAME AND OFFICE ADDRESS: ATTY.

SCC ID NO .: 0566249-9

R J LACKEY 126 S Market St DANVILLE, VA 24541-0000

5. TOTAL NUMBER OF AUTHORIZED

SHARES: 5,000

- 3. CITY OR COUNTY OF VA REGISTERED OFFICE: 590-DANVILLE CITY
- STATE OR COUNTRY OF INCORPORATION: VA-Virginia

DO NOT ATTEMPT TO ALTER THE INFORMATION ABOVE. Carefully read the enclosed instructions. Type or print in black only.

6. PRINCIPAL OFFICE ADDRESS:

Mark this box if address shown below is correct	If the block to the left is blank or contains incorrect data please add or correct the address below.
ADDRESS: PO BOX 119	ADDRESS: PO BOX 119
CITY/ST/ZIP	CITY/ST/ZIP ReidSville NC 27323

7. DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed.

An individual may be designated as both a director and an officer.

Mark appropriate box unless area below is blank: ☐ Information is correct ☐ Information ☐ Delete information	If the block to the left is blank or contains incorrect data, please mark appropriate box and enter information below: Correction Addition Replacement
OFFICER 🛮 DIRECTOR 🛣	OFFICER DIRECTOR
NAME: KOFI A DOONQUAH MD	NAME:
TITLE: President	TITLE:
ADDRESS: 2509 A RICHARDSON DRIVE	ADDRESS:
CITY/ST/ZIP: REIDSVILLE, NC 2/7320-0000	CITY/ST/ZIP:

I affirm that the information contained in this report is accurate and complete as of the date below.

SIGNATURE OF DIRECTOR/OFFICER
LISTED INTAIS REPORT

Kofi A. Darquah / President

10-1-21

DATE

It is a Class 1 misdemeans for any person to sign a document that is false in any material respect with intent that the document be delivered to the Commission for filing.

