

**No6000012469**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

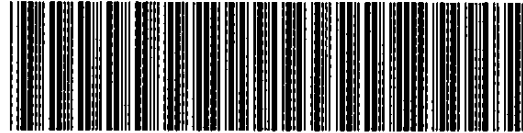
(Business Entity Name)

(Document Number)

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**FILED**  
2006 DEC -5 PM 12:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**RECEIVED**  
06 NOV 13 PM 2:08  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*12-6*

**COVER LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: FLORIDA OBTOPROTECTIVE PHYSICIANS ASSOC. 2, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one(1) copy of the Articles of Incorporation and a check for:

\$70.00  
Filing Fee

\$78.75  
Filing Fee &  
Certificate of  
Status

\$78.75  
Filing Fee  
& Certified Copy

\$87.50  
Filing Fee,  
Certified Copy  
& Certificate

**ADDITIONAL COPY REQUIRED**

FROM: Roderic LADY  
Name (Printed or typed)

107 SHORE DR  
Address

DUNEDIN, FL 34698  
City, State & Zip

907 230-4258  
Daytime Telephone number

**NOTE: Please provide the original and one copy of the articles.**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 14, 2006

RODERIC LACY  
107 SHORE DR.  
DUNEDIN, FL 34698

SUBJECT: FLORIDA CHIROPRACTIC PHYSICIANS ASSOCIATION 2, INC.  
Ref. Number: W06000049826

We have received your document for FLORIDA CHIROPRACTIC PHYSICIANS ASSOCIATION 2, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

The person designated as incorporator in the document and the person signing as incorporator must be the same.

An effective date may be added to the Articles of Incorporation if a 2007 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Document Specialist  
New Filing Section

Letter Number: 906A00066683

Articles of Incorporation

Application for Not For Profit Incorporation, State of Florida

FILED

2006 DEC -5 PM 12:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

December 2, 2006,

Article I Name: Florida Chiropractic Physicians Association 2, Inc.

Article II Principal place of business and mailing address: 107 Shore Drive, Dunedin, Florida 34698

Article III Specific purpose: To advance the chiropractic profession

Article IV Method of directors' appointment: Directors shall be appointed by the CEO

Article V Names and addresses of directors:

CEO: Roderic Lacy, 107 Shore Drive, Dunedin, Florida 34698

President: Roderic Lacy, 107 Shore Drive, Dunedin, Florida 34698

Vice-President: John Sullivan,

Treasurer/Secretary: Paul Yocom, 470 South Carpenter Road, Titusville, Florida, 32796

East Coast Director: A. Michael Petker, 220 Mason Ave., Holly Hill, Florida, 32117

West Coast Director: Michael Schaefer, 2038 Iowa Avenue NE, St. Petersburg, Florida, 33703

Article VI Name and address of initial registered agent: Patricia W. Ford, 656 Dexter Dr., Dunedin, FL. 34698

Article VII Name and address of incorporator: Roderic Lacy, 107 Shore Drive, Dunedin, Florida, 34698,

Article VIII Effective Date: January 2, 2007

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Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity.

Signature/Registered Agent: Patricia W. Ford Date: December 2, 2006

Signature/Incorporator: Roderic Lacy Date: December 2, 2006

FCPAII/not for profit incorporation (word laptop comp)