

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000106657

FILED
Jul 02, 2004
Secretary of State

Entity Name: FLYNN CHIROPRACTIC HEALTH CENTER, INC.

Current Principal Place of Business:

3522 SOUTH FLORIDA AVENUE
SUITE C & D
LAKELAND, FL 33803 US

New Principal Place of Business:

3522 SOUTH FLORIDA AVENUE
SUITE C
LAKELAND, FL 33803 US

Current Mailing Address:

3522 SOUTH FLORIDA AVENUE
SUITE C & D
LAKELAND, FL 33803 US

New Mailing Address:

3522 SOUTH FLORIDA AVENUE
SUITE C
LAKELAND, FL 33803 US

FEI Number: 20-0258344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FLYNN, WENDY L D.C.
3522 SOUTH FLORIDA AVENUE, SUITE C
LAKELAND, FL 33803 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FLYNN, WENDY L PRES
Address: PO BOX 6081
City-St-Zip: LAKELAND, FL 33813 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FLYNN, WENDY L PRES
Address: 3255 S. FLORIDA AVE., SUITE C
City-St-Zip: LAKELAND, FL 33803 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: WENDY L. FLYNN, D.C.

WLF

07/02/2004

Electronic Signature of Signing Officer or Director

Date