

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 696719

**FILED**  
**Mar 18, 2015**  
**Secretary of State**  
**CC1343358907**

**Entity Name:** EVERETT H. WELLS D.C., PROFESSIONAL ASSOCIATION

**Current Principal Place of Business:**

1251 S. VOLUSIA AVE  
ORANGE CITY, FL 32763

**Current Mailing Address:**

1251 S. VOLUSIA AVE  
ORANGE CITY, FL 32763 US

**FEI Number:** 59-2119172

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WELLS, EVERETT HJR  
2205 PARKVIEW AVE  
ORANGE CITY, FL 32763 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 SV  
Name WELLS, JOANNE MSECRET,  
Address 2205 PARKVIEW AVENUE  
City-State-Zip: ORANGE CITY FL 32763

Title PT  
Name WELLS, EVERETT HJR  
Address 2205 PARKVIEW AVENUE  
City-State-Zip: ORANGE CITY FL 32763

*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:** EVERETT H. WELLS JR.

**PRESIDENT**

**03/18/2015**

Electronic Signature of Signing Officer/Director Detail

Date