

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J58826

Entity Name: CHIROPRACTIC HEALTH CENTER OF ENGLEWOOD, INC.

Current Principal Place of Business:

150 W. DEARBORN ST.
ENGLEWOOD, FL 34223

Current Mailing Address:

150 W. DEARBORN ST.
ENGLEWOOD, FL 34223

FEI Number: 59-2790788

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARMS, BARBARA L
150 W DEARBORN ST
ENGLEWOOD, FL 34223 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 VP
Name HARMS, DOUGLAS R.
Address 150 W.DEARBORN ST.
City-State-Zip: ENGLEWOOD FL 34223

Title PRESIDENT
Name HARMS, BARBARA L.
Address 150 W.DEARBORN ST.
City-State-Zip: ENGLEWOOD FL 34223

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: BARBARA L. HARMS, D.C.

PRESIDENT

03/16/2020

Electronic Signature of Signing Officer/Director Detail

Date