

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K55389

Entity Name: CLAIRE D. SCHILL, D.C. P.A.

Current Principal Place of Business:

480 EAST S.R. 436
CASSELBERRY, FL 32707

Current Mailing Address:

480 EAST S.R. 436
CASSELBERRY, FL 32707 US

FEI Number: 59-2924430

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SCHILL, CLAIRE D., D.C.
480 EAST S.R. 436
CASSELBERRY, FL 32707 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 DC
Name SCHILL, CLAIRE D., D.C.
Address 480 EAST S.R. 436
City-State-Zip: CASSELBERRY FL 32707

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: CLAIRE D. SCHILL D.C., P.A.

PHYSICIAN

02/22/2013

Electronic Signature of Signing Officer/Director Detail

Date