

2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000110066

Entity Name: AMERICAN FAMILY & SPORTS CHIROPRACTIC CENTER, INC.

Current Principal Place of Business:

4649 CLYDE MORRIS BLVD
#609
PORT ORANGE, FL 32129

Current Mailing Address:

4649 CLYDE MORRIS BLVD
#609
PORT ORANGE, FL 32129 US

FEI Number: 59-3756167

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HENNIGHAN, ELIZABETH J D. C.
4649 CLYDE MORRIS BLVD
#609
PORT ORANGE, FL 32129 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: ELIZABETH HENNIGHAN

03/07/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PTS
Name HENNIGHAN, ELIZABETH J.. DR.
Address 4649 CLYDE MORRIS BLVD
#609
City-State-Zip: PORT ORANGE FL 32129

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: ELIZABETH J. HENNIGHAN, DC

PTS

03/07/2019

Electronic Signature of Signing Officer/Director Detail

Date