

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000048228

Entity Name: ORTEGA CHIROPRACTIC CORP.

Current Principal Place of Business:

5367 ORTEGA BOULEVARD
JACKSONVILLE, FL 32210

Current Mailing Address:

5367 ORTEGA BOULEVAR
JACKSONVILLE, FL 32210 US

FEI Number: 43-1952532

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GALLAGHER & COMPANY, P.A.
2323 EAGLES NEST ROAD
JACKSONVILLE, FL 32246 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 PSD
Name READ, STEVEN C
Address 5539 ROOSEVELT BLVD
City-State-Zip: JACKSONVILLE FL 32244

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: STEVEN C READ

PSD

03/28/2016

Electronic Signature of Signing Officer/Director Detail

Date