

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000004444

Entity Name: BAILEY CHIROPRACTIC LIFE CENTER, INC.

Current Principal Place of Business:

224 SOUTHPARK CIRCLE EAST
ST. AUGUSTINE, FL 32086

Current Mailing Address:

224 SOUTHPARK CIRCLE EAST
ST. AUGUSTINE, FL 32086 US

FEI Number: 55-0844918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAILEY, JASON A
224 SOUTH PARK CIRCLE EAST
ST. AUGUSTINE, FL 32088 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: JASON BAILEY

01/07/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name BAILEY, JASON A
Address 224 SOUTH PARK CIRCLE EAST
City-State-Zip: ST. AUGUSTINE FL 32086

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: JASON BAILEY

OWNER

01/07/2017

Electronic Signature of Signing Officer/Director Detail

Date