

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P09000036701

**Entity Name:** PROSPORT CHIROPRACTIC & WELLNESS, INC.

**Current Principal Place of Business:**

2869 WILSHIRE DR  
UNIT 202  
ORLANDO, FL 32835

**Current Mailing Address:**

628 AEOLIAN DR.  
NEW SMYRNA BEACH, FL 32168 US

**FEI Number: 26-4711484**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SNOW, ROBERT S DR.  
628 AEOLIAN DR  
NEW SMYRNA BEACH, FL 32168 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:** ROBERT SHAWN SNOW

01/09/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SNOW, ROBERT S  
Address        628 AEOLIAN DR.  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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:** ROBERT SHAWN SNOW, DC

PRESIDENT

01/09/2017

Electronic Signature of Signing Officer/Director Detail

Date