2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2020
Secretary of State
5725531579CC

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Entity Name: COFFMAN CHIROPRACTIC INC.

Current Principal Place of Business:

5700 COBBLESTONE LN
DAVIE, FL 33331

Current Mailing Address:

5700 COBBLESTONE LN
553
DAVIE, FL 33331 US

FEI Number: 27-1522816

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COFFMAN, JOSEPH J
5700 COBBLESTONE LN.
DAVIE, FL 33331 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	P, S	Title	D
Name	COFFMAN, JOSEPH J	Name	JOSEPH, COFFMAN J
Address	8120 GENEVA CT. 553	Address	8120 GENEVA CT. 553
City-State-Zip:	DORAL FL 33166	City-State-Zip:	DORAL FL 33166
Title	V, T	Title	D
Name	BARTELL-COFFMAN, LISA M	Name	BARTELL-COFFMAN, LISA M
Address	8120 GENEVA CT. 553	Address	8120 GENEVA CT. 553
City-State-Zip:	DORAL FL 33166	City-State-Zip:	DORAL FL 33166

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: JOSEPH COFFMAN PRESIDENT 03/24/2020

Electronic Signature of Signing Officer/Director Detail — Date