

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000009610

Entity Name: TAMPA AVE CHIROPRACTIC CENTER, INC.

Current Principal Place of Business:

764 D SOUTH TAMPA AVE
ORLANDO, FL 32805

Current Mailing Address:

764 D SOUTH TAMPA AVE
ORLANDO, FL 32805

FEI Number: 46-1927884

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARK, SANFORD
840 WHITE IVEY CT.
APOPKA, FL 32712 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 D
Name MARK, SANFORD
Address 840 WHITE IVEY CT.
City-State-Zip: APOPKA FL 32712

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: MARK SANFORD

DIRECTOR

04/30/2015

Electronic Signature of Signing Officer/Director Detail

Date