

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P13000097922

Entity Name: LANE CHIRORPACTIC & REHAB, INC

Current Principal Place of Business:

2151 S. LANE AVE.
SUITE 308
JACKSONVILLE, FL 32210

Current Mailing Address:

2151 S. LANE AVE.
SUITE 308
JACKSONVILLE, FL 32210

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOANG, TAM M
2151 LANE AVE.
SUITE 308
JACKSONVILLE, FL 32210 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
Name HOANG, TAM M
Address 2151 S. LANE AVE
City-State-Zip: JACKSONVILLE FL 32210

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: TAM M HOANG

MANAGER

04/26/2014

Electronic Signature of Signing Officer/Director Detail

Date