

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14000038133

Entity Name: FARMER FAMILY CHIROPRACTIC AND WELLNESS, P.A.

Current Principal Place of Business:

532 CANAL STREET
NEW SMYRNA BEACH, FL 32168

Current Mailing Address:

532 CANAL STREET
NEW SMYRNA BEACH, FL 32168 US

FEI Number: 46-5540852

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FARMER, DAVID B
532 CANAL STREET
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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name FARMER, DAVID B
Address 532 CANAL STREET
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VP
Name FARMER, NANCY M
Address 532 CANAL STREET
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: DAVID FARMER

PRESIDENT

04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date