

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 587535 (6)

1. Corporation Name

CHIROPRACTIC ASSOCIATES OF GAINESVILLE, RICHESON
AND SUGGS, P.A.

Principal Place of Business

Mailing Address

3603 S. W. 13TH STREET
GAINESVILLE FL 32608

3603 S. W. 13TH STREET
GAINESVILLE FL 32608



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

County

Zip

County

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

09/08/1978

3a. Date of Last Report

07/21/1995

4. FEIN Number

59-1856700

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.03?
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

RICHESON, F. KEITH
3603 SW 13TH STREET
GAINESVILLE FL 32608

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation hereby certifies this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature type (print name of agent or director) (date)

Signature type (print name of agent or director) (date)

(date)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

P
RICHESON, F. KEITH
3603 SW 13TH ST
GAINESVILLE FL

☐ DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

VST
SUGGS, LONDON
3603 SW 13TH ST
GAINESVILLE FL

☐ DELETE

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13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE

2. NAME

3. STREET ADDRESS

4. CITY-ST-ZIP

5. TITLE

6. NAME

7. STREET ADDRESS

8. CITY-ST-ZIP

9. TITLE

10. NAME

11. STREET ADDRESS

12. CITY-ST-ZIP

13. TITLE

14. NAME

15. STREET ADDRESS

16. CITY-ST-ZIP

17. TITLE

18. NAME

19. STREET ADDRESS

20. CITY-ST-ZIP

21. TITLE

22. NAME

23. STREET ADDRESS

24. CITY-ST-ZIP

25. TITLE

26. NAME

27. STREET ADDRESS

28. CITY-ST-ZIP

29. TITLE

30. NAME

31. STREET ADDRESS

32. CITY-ST-ZIP

500001858575
-06/11/96--01140--030
***200.00

☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/96

352-372-4110
Dialing Prefix

CR2E034 (12/95)