2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2011
Secretary of State

DOCUMENT# 703046

Entity Name: VOLUSIA COUNTY CHIROPRACTIC SOCIETY, INC.

Current Principal Place of Business:

569 HEALTH BLVD., SUITE C
DAYTONA BEACH, FL 32124

New Principal Place of Business:

Current Mailing Address:

569 HEALTH BLVD., SUITE C
DAYTONA BEACH, FL 32124

New Mailing Address:

FEI Number: 59-2119241 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANTOS, JAMES C DC
569 HEALTH BLVD., SUITE C
DAYTONA BEACH, FL 32124 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: ANTOS, JAMES C DC
Address: 569 HEALTH BLVD., SUITE C
City-St-Zip: DAYTONA BEACH, FL 32124

Title: VP
Name: ENGLER, KEITH DC
Address: 225 N CAUSEWAY
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: T
Name: MOUTSOPOLUS, CATHY
Address: 940 N. HALIFAX AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES ANTOS P 04/22/2011

Electronic Signature of Signing Officer or Director — Date