## 2010 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# G81868

**FILED** May 28, 2010 Secretary of State

Entity Name: RINEHART CHIROPRACTIC LIFE CENTER, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

% DAVID L. RINEHART, II % DAVID L. RINEHART, II

813 U.S. HIGHWAY #1 11380 PROSPERITY FÁRMS ROAD, STE. 110B LAKE PARK, FL 33403

PALM BEACH GARDENS, FL 33410

**Current Mailing Address:** New Mailing Address:

% DAVID L. RINEHART, II % DAVID L. RINEHART, II

11380 PROSPERITY FARMS ROAD, STE. 110B 813 U.S. HIGHWAY #1

LAKE PARK, FL 33403 PALM BEACH GARDENS, FL 33410

FEI Number: 59-2365215 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RINEHART, DAVID L., II RINEHART, DAVID L., II 11380 PROSPERITY FARMS ROAD 813 U. S. HÍGHWAY #1

LAKE PARK, FL 33403 US SUITE 110B PALM BEACH GARDENS, FL 33410 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: DAVID L. RINEHART, II 05/28/2010

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title: **PSD** 

Name: RINEHART, DAVID L., II

11380 PROSPERITY FARMS ROAD, STE. 110B Address:

City-St-Zip: PALM BEACH GARDENS, FL 33410

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 L. RINEHART, II **PSD** 05/28/2010