2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 16, 2012
Secretary of State

DOCUMENT# J68568

Entity Name: WEISS FAMILY CHIROPRACTIC CENTER OF LAKE WORTH, INC.

Current Principal Place of Business:

4343 10TH AVE N
LAKE WORTH, FL 33461

New Principal Place of Business:

4343 10TH AVE N
SUITE 13
LAKE WORTH, FL 33461 UN

Current Mailing Address:

4343 10TH AVE N
LAKE WORTH, FL 33461

New Mailing Address:

4343 10TH AVE N
SUITE 13
LAKE WORTH, FL 33461 UN

FEI Number: 59-2841625 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WEISS, BRADLEY G
4343 10TH AVE NORTH
LAKE WORTH, FL 33461 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: D
Name: WEISS, BRADLEY G
Address: 4343 10TH AVE N
City-St-Zip: LAKE WORTH, FL 33461

Title: D
Name: WEISS, CETTY M
Address: 11924 WEST FOREST HILL BLVD #13
City-St-Zip: WELLINGTON, FL 33414

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: CETTY WEISS VP 05/16/2012

Electronic Signature of Signing Officer or Director Date