

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K53876

FILED
Jan 25, 2012
Secretary of State

Entity Name: STEVEN J. AUGUSTINE, M.S., D.C., P.A.

Current Principal Place of Business:

C/O NW CHIROPRACTIC, WESTWOOD PLAZA
4547 GUNN HWY
TAMPA, FL 33624 US

New Principal Place of Business:

Current Mailing Address:

C/O STEVEN J. AUGUSTINE, M.S., D.C.
2800 BAHIA VISTA ST., SUITE 100
SARASOTA, FL 34239 US

New Mailing Address:

FEI Number: 59-2920246

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEARD, ROBERT G JR
16644 VALLELY DRIVE
TAMPA, FL 33618 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: DPST
Name: AUGUSTINE, STEVEN J MS, DC
Address: 4547 GUNN HIGHWAY
City-St-Zip: TAMPA, FL 33624 US

Title: D
Name: BEARD, ROBERT G JR
Address: 16644 VALLELY DRIVE
City-St-Zip: TAMPA, FL 33618 US

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: ROBERT G BEARD JR JD LL.M. CPA

D-VP

01/25/2012

Electronic Signature of Signing Officer or Director

Date