

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L99982

FILED
Jan 08, 2007
Secretary of State

Entity Name: VICKI M. MERRICK, D.C., P.A.

Current Principal Place of Business:

1326 MALABAR ROAD SE
SUITE 5
PALM BAY, FL 32907 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 100246
PALM BAY, FL 32910 US

New Mailing Address:

FEI Number: 59-3028323 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MERRICK, VICKI M.
1326 MALABAR RD. SE
SUITE 5
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

MERRICK, VICKI M PRES
1326 MALABAR RD. SE
SUITE 5
PALM BAY, FL 32907 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: VICKI M. MERRICK

01/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MERRICK, VICKI M.,
Address: 1326 MALABAR RD. SE, SUITE 5
City-St-Zip: PALM BAY, FL 32907

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MERRICK, VICKI M PRES
Address: 1326 MALABAR RD. SE, SUITE 5
City-St-Zip: PALM BAY, FL 32907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: VICKI M. MERRICK

PRES

01/08/2007

Electronic Signature of Signing Officer or Director

Date