2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# P01000034400

Entity Name: BETTER HEALTH CHIROPRACTIC, P.A.

Current Principal Place of Business:

6166 W. GULF TO LAKE HWY 44
CRYSTAL RIVER, FL 34429

New Principal Place of Business:

6166 W. GULF TO LAKE HWY
CRYSTAL RIVER, FL 34429

Current Mailing Address:

6166 W. GULF TO LAKE HWY 44
CRYSTAL RIVER, FL 34429

New Mailing Address:

6166 W. GULF TO LAKE HWY
CRYSTAL RIVER, FL 34429

FEI Number: 59-3715820 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCFARLAND-BRYANT, CHERYL D
12255 E. RAINTREE CT
INVERNESS, FL 34450 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: MCFARLAND-BRYANT, CHERYL D DC
Address: 12255 E. RAINTREE CT
City-St-Zip: INVERNESS, FL 34450

Title: DV ( ) Delete
Name: HOLLAND, LINDA E DC
Address: 38225 HAZEL
City-St-Zip: HARRISON TOWNSHIP, MI 48045

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHERYL M. BRYANT PRES 04/23/2009

Electronic Signature of Signing Officer or Director — Date