

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000034400

FILED
Feb 19, 2011
Secretary of State

Entity Name: BETTER HEALTH CHIROPRACTIC, P.A.

Current Principal Place of Business:

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

New Principal Place of Business:

Current Mailing Address:

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

New Mailing Address:

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

OFFICERS AND DIRECTORS:

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

Title: DV
Name: HOLLAND, LINDA E DC
Address: 28438 S. RIVER RD.
City-St-Zip: HARRISON TOWNSHIP, MI 48045

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: CHERYL MCFARLAND-BRYANT

PRES

02/19/2011

Electronic Signature of Signing Officer or Director

Date