2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000080724

FILED Jul 09, 2007 Secretary of State

Entity Nar	me: FIRST C	OAST CHIROPRACTIC, INC.			,	
Current Principal Place of Business:			New Principal Place of Business:			
1482 S. TH JACKSON	HIRD ST. VILLE BEACH	H, FL 32250				
Current Mailing Address:			New Mailing Address:			
1482 S. TH JACKSON	HRD ST. VILLE BEACH	H, FL 32250				
FEI Number:	umber: 59-3739086 FEI Number Applied For ()		FEI Number Not Applicable ()		Certificate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
1712 HIĞH	(ENNETH Z ILAND VIEW STINE, FL 32					
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	d office or registered agent, or both,	
SIGNATUF	RE:					
	Electro	nic Signature of Registered Ag	ent		Date	
		93(2)(b), F.S., the corporation did no	ot receive the prior notic	e.		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	FINGER, KENI	ID VIEW DRIVE	Title: Name: Address: City-St-Zip:	FINGER, KEI 1712 HIGHLA	(X) Change()Addition NNETH Z AND VIEW DRIVE INE, FL 32092	
Title: Name:	() Delete	Title: Name:	DS ALLEN. JENI	()Change(X)Addition NIFER F	

Address: City-St-Zip:

Address: 140 GATEWAY CIRCLE, SUITE 2

City-St-Zip: ST. JOHN, FL 32259

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: KENNETH ZANE FINGER PT 07/09/2007