2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000008

Entity Name: FERNANDINA CHIROPRACTIC CENTER, INC.

FILED Apr 03, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

474307 SR 200

FERNANDINA BEACH, FL 32034

Current Mailing Address: New Mailing Address:

474307 SR 200

FERNANDINA BEACH, FL 32034

FEI Number: 75-3011964 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GLICKMAN, BRUCE S DC GLICKMAN, BRUCE S DC

31072 GRASSY PARKE DRIVE 2671 FIRST AVE

FERNANDINA BEACH, FL 32034 US FERNANDINA BEACH, FL 32034 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: DR. BRUCE S. GLICKMAN 04/03/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DC () Delete Title: DC (X) Change () Addition

Name: GLICKMAN, BRUCE S DC Name: GLICKMAN, BRUCE S DC

Address: 31072 GRASSY PARKE DRIVE Address: 2671 FIRST AVE

City-St-Zip: FERNANDINA BEACH, FL 32034 City-St-Zip: FERNANDINA BEACH, FL 32034

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: DR. BRUCE GLICKMAN DC 04/03/2009