2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000000008

Entity Name: FERNANDINA CHIROPRACTIC CENTER, INC.

FILED Feb 02, 2011 Secretary of State

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

474307 SR 200 464073 SR 200 FERNANDINA BEACH, FL 32034 SUITE 4

YULEE, FL 32097

Current Mailing Address: New Mailing Address:

474307 SR 200 464073 SR 200

FERNANDINA BEACH, FL 32034 SUITE

YULEE, FL 32097

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

2671 FIRST AVE 86325 MEADOWFIEL BLUFFS RD

FERNANDINA BEACH, FL 32034 US YULEE, FL 32097 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 GLICKMAN 02/02/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DO

Name: GLICKMAN, BRUCE S DC

Address: 86325 MEADOWFIELD BLUFFS RD

City-St-Zip: YULEE, FL 32097

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: DR. BRUCE GLICKMAN DC 02/02/2011