2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2009
Secretary of State

DOCUMENT# P02000036989

Entity Name: BACK INTO HEALTH CHIROPRACTIC, INC.

Current Principal Place of Business:

13961 SPOONBILL ST NORTH
JACKSONVILLE, FL 32224

New Principal Place of Business:

13121 ATLANTIC BLVD STE 4
JACKSONVILLE, FL 32225

Current Mailing Address:

13961 SPOONBILL ST NORTH
JACKSONVILLE, FL 32224

New Mailing Address:

13121 ATLANTIC BLVD STE 4
JACKSONVILLE, FL 32225

FEI Number: 59-3661434 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KEASLER, FRANK R JR.
HENDERSON KEASLER LAW FIRM, P.A.
4309 PABLO OAKS COURT, SUITE FIVE
JACKSONVILLE, FL 32224 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: D ( ) Delete
Name: KUCHLER, THEODORE C III
Address: 13961 SPOONBILL ST N
City-St-Zip: JACKSONVILLE, FL 32224

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KUCHLER, THEODORE C III
Address: 601 FIRST ST S #3D
City-St-Zip: JACKSONVILLE BEACH, FL 32250

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: THEODORE C KUCHLER PRES 04/22/2009

Electronic Signature of Signing Officer or Director — Date