

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000059014

FILED
Apr 11, 2007
Secretary of State

Entity Name: CHARLESTON CHIROPRACTIC MEDICINE AND REHABILITATION, P.A.

Current Principal Place of Business:

1055 S CONGRESS AVE
DELRAY BEACH, FL 33445

New Principal Place of Business:

Current Mailing Address:

1055 S CONGRESS AVE
DELRAY BEACH, FL 33445

New Mailing Address:

FEI Number: 06-1697616

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHARLESTON, DANIEL DC
9338 SW 3RD ST #505
BOCA RATON, FL 33428 US

Name and Address of New Registered Agent:

CHARLESTON, DANIEL DC
9709 ARBOR OAKS LN
305
BOCA RATON, FL 33428 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: _____

Electronic Signature of Registered Agent

04/11/2007

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DCEO () Delete
Name: CHARLESTON, DANIEL DC
Address: 9338 SW 3RD ST #505
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: CHARLESTON, DANIEL DC
Address: 9709 ARBOR OAKS LN, #305
City-St-Zip: BOCA RATON, FL 33428

I hereby certify that the information supplied with this filing does not qualify for the 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: DANIEL CHARLESTON

CEO

04/11/2007

Electronic Signature of Signing Officer or Director

Date