

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069650

FILED
Jan 05, 2012
Secretary of State

Entity Name: JOSEPH JOHNSTON CHIROPRACTIC CLINIC, INC.

Current Principal Place of Business:

1230 SEMINOLA BLVD.
CASSELBERRY, FL 32707

New Principal Place of Business:

1230 SEMINOLA BLVD.
CASSELBERRY, FL 32707 UN

Current Mailing Address:

1230 SEMINOLA BLVD.
CASSELBERRY, FL 32707

New Mailing Address:

FEI Number: 01-0779888

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSTON, JOSEPH
1230 SEMINOLA BLVD.
CASSELBERRY, FL 32707 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

OFFICERS AND DIRECTORS:

Title: PTS
Name: JOHNSTON, JOSEPH L
Address: 1230 SEMINOLA BLVD
City-St-Zip: CASSELBERRY, FL 32707

Title: PTS
Name: JOHNSTON, JOSEPH L
Address: 1230 SEMINOLA BLVD
City-St-Zip: CASSELBERRY, FL 32707

Title: PTS
Name: JOHNSTON, JOSEPH L
Address: 1230 SEMINOLA BLVD
City-St-Zip: CASSELBERRY, FL 32707

Title: PTS
Name: JOHNSTON, JOSEPH L
Address: 1230 SEMINOLA BLVD
City-St-Zip: CASSELBERRY, FL 32707

Title: PTS
Name: JOHNSTON, JOSEPH L
Address: 1230 SEMINOLA BLVD
City-St-Zip: CASSELBERRY, FL 32707

Title: PTS
Name: JOHNSTON, JOSEPH L
Address: 1230 SEMINOLA BLVD
City-St-Zip: CASSELBERRY, FL 32707

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: JOSEPH L JOHNSTON

PRES

01/05/2012

Electronic Signature of Signing Officer or Director

Date