2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2012
Secretary of State

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Entity Name: BAKER CHIROPRACTIC, INC.

Current Principal Place of Business:

5760 11 AVENUE NORTH
ST. PETERSBURG, FL 33710 US

New Principal Place of Business:

6295 CENTRAL AVENUE
ST. PETERSBURG, FL 33710 US

Current Mailing Address:

5760 11 AVENUE NORTH
ST. PETERSBURG, FL 33710 US

New Mailing Address:

5500 10 AVENUE NORTH
ST. PETERSBURG, FL 33710 US

FEI Number: 20-0067394 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAKER, JASON T DR.
5760 11 AVENUE NORTH
ST. PETERSBURG, FL 33710 US

Name and Address of New Registered Agent:

BAKER, JASON T DR.
5500 10 AVENUE NORTH
ST. PETERSBURG, FL 33710 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: _____ 03/12/2012
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P
Name: BAKER, JASON T DR.
Address: 5500 10 AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33710 US

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: JASON T. BAKER PRES 03/12/2012
Electronic Signature of Signing Officer or Director — Date