

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000028917

FILED
May 05, 2008
Secretary of State**Entity Name:** DELRAY BEACH FAMILY CHIROPRACTIC CENTER INC**Current Principal Place of Business:**990 SOUTH CONGRESS AVE
STE 6
DELRAY BEACH, FL 33445 US**New Principal Place of Business:****Current Mailing Address:**990 SOUTH CONGRESS AVE
STE 6
DELRAY BEACH, FL 33445 US**New Mailing Address:****FEI Number:** 20-0725726**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**THEODORE, EDNER
9536 CASTLEFORD POINT
ORLANDO, FL 32836 US**Name and Address of New Registered Agent:**FEGHENS, DELVA
1121 FOSTERS MILLS DR
BOYNTON BEACH, FL 33436 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: FEGHENS DELVA

05/05/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THEODORE, EDNER
Address: 9536 CASTLEFORD POINT
City-St-Zip: ORLANDO, FL 32836 US

Title: VP (X) Delete
Name: DELVA, FEGHENS
Address: 1121 FOSTERS MILL DR
City-St-Zip: BOYTON BEACH, FL 33436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FEGHENS, DELVA
Address: 1121 FOSTERS MILLS DR
City-St-Zip: BOYNTON BEACH, FL 33436 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: FEGHENS DELVA

PRES

05/05/2008

Electronic Signature of Signing Officer or Director

Date