

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028917

FILED
Apr 15, 2011
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:

FEGHENS, DELVA
1121 FOSTERS MILLS DR
BOYNTON BEACH, FL 33436 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: P
Name: FEGHENS, DELVA
Address: 1121 FOSTERS MILLS DR
City-St-Zip: BOYNTON BEACH, FL 33436 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: FEGHENS DELVA

P

04/15/2011

Electronic Signature of Signing Officer or Director

Date