

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030081

FILED
Mar 16, 2012
Secretary of State

Entity Name: SOUTH TAMPA CHIROPRACTIC CENTER P.A.

Current Principal Place of Business:

1100 NORTH SHORE DRIVE
205
ST. PETERSBURG, FL 337011448

New Principal Place of Business:

Current Mailing Address:

1100 NORTH SHORE DRIVE
205
ST. PETERSBURG, FL 337011448

New Mailing Address:

FEI Number: 13-4274294 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DESAPIO, ROBERT
1100 NORTH SHORE DRIVE
205
ST. PETERSBURG, FL 337011448 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: PVD
Name: DESAPIO, ROBERT
Address: 1100 NORTH SHORE DRIVE
City-St-Zip: ST. PETERSBURG, FL 337011448

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: ROBERT DESAPIO

PVD

03/16/2012

Electronic Signature of Signing Officer or Director

Date