

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000033630

Entity Name: CHIRO MATRIX, P.A.

FILED
Apr 11, 2006
Secretary of State

Current Principal Place of Business:

2959 ALAFAYA TRAIL
STE 121
OVIEDO, FL 327659482 US

New Principal Place of Business:

385 HARMONY WAY
OVIEDO, FL 32765 US

Current Mailing Address:

2959 ALAFAYA TRAIL
STE 121
OVIEDO, FL 327659482 US

New Mailing Address:

P.O. BOX 622766
OVIEDO, FL 32762-276 US

FEI Number: 61-1466515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUSBANDS, JUDY E DR
3954 VERSAILLES DRIVE
ORLANDO, FL 32808 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HUSBANDS, JUDY E DR
Address: 3954 VERSAILLES DRIVE
City-St-Zip: ORLANDO, FL 32808

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: DR. JUDY HUSBANDS

PRES

04/11/2006

Electronic Signature of Signing Officer or Director

Date