2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2011
Secretary of State

DOCUMENT# P04000090665

Entity Name: AUGUSTINE CHIROPRACTIC CENTER, P.A.

Current Principal Place of Business:

5317 VILLAGE MARKET DR
WESLEY CHAPEL, FL 33543 US

New Principal Place of Business:

Current Mailing Address:

5317 VILLAGE MARKET DR
WESLEY CHAPEL, FL 33543 US

New Mailing Address:

FEI Number: 20-1324973 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEARD, ROBERT G
16644 VALLELY DRIVE
TAMPA, FL 33618 US

Name and Address of New Registered Agent:

BEARD, ROBERT G JR
16644 VALLELY DRIVE
TAMPA, FL 33618 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: ROBERT G BEARD JR JD LLM CPA 02/13/2011
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DPST
Name: AUGUSTINE, BRIAN J D.C.
Address: 5317 VILLAGE MARKET DR
City-St-Zip: WESLEY CHAPEL, FL 33543 US

Title: D
Name: BEARD, ROBERT G JR
Address: 16644 VALLELY DRIVE
City-St-Zip: TAMPA, FL 33618 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: ROBERT G BEARD JR JD LLM CPA D 02/13/2011
Electronic Signature of Signing Officer or Director Date