## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000120756

Entity Name: SPRINGER CHIROPRACTIC, INC.

FILED Apr 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

639 38TH AVE NE 4200 4TH ST N

ST. PETERSBURG, FL 33704 ST. PETERSBURG, FL 33703

**Current Mailing Address: New Mailing Address:** 

639 38TH AVE NE 4200 4TH ST N

ST. PETERSBURG, FL 33704 ST. PETERSBURG, FL 33703

FEI Number: 20-1453752 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SPRINGER, ERIC SPRINGER, ERIC 4200 4TH ST N 639 38TH AVE NE

ST. PETERSBURG, FL 33704 US ST. PETERSBURG, FL 33703 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: ERIC SPRINGER 04/19/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

Title:

## **OFFICERS AND DIRECTORS:**

Title: () Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete SPRINGER, ERIC Name: Name: 4200 4TH ST N Address: Address: City-St-Zip: ST. PETERSBURG, FL 33703 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.

Ρ SIGNATURE: ERIC SPRINGER 04/19/2009