

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000166846

FILED
Jan 08, 2012
Secretary of State

Entity Name: CONFORTI'S CROSSROADS CHIROPRACTIC CENTERS, INC.

Current Principal Place of Business:

1811 HEALTH CARE DR.
NEW PORT RICHEY, FL 34655

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1811 HEALTH CARE DR.
NEW PORT RICHEY, FL 34655 UN

Current Mailing Address:

4040 TAMPA RD.
OLDSMAR, FL 34677

New Mailing Address:

FEI Number: 20-1941810

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONFORTI, CARL G
4040 TAMPA RD.
OLDSMAR, FL 34677 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: CONFORTI, CARL G
Address: 4040 TAMPA RD.
City-St-Zip: OLDSMAR, FL 34677

Title: D
Name: ROGERS, DAMIEN
Address: 4040 TAMPA RD.
City-St-Zip: OLDSMAR, FL 34677

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: CARL CONFORTI

P

01/08/2012

Electronic Signature of Signing Officer or Director

Date