

P05000167488

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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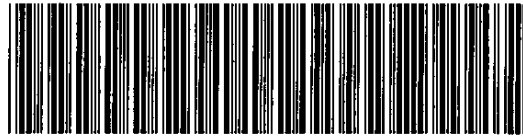
(Business Entity Name)

(Document Number)

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2006 AUG 14 PM 3:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*LA. Charge*

C. Ocullette AUG 22 2006

TOMMY D. PERMENTER, JR.  
(ADMITTED IN FL & SC)



2603 S.E. 17TH STREET, SUITE B  
OCALA, FLORIDA 34471

TELEPHONE  
(352) 622-1811  
FACSIMILE  
(352) 622-1866

August 11, 2006

Division of Corporations  
Post Office Box 6327  
Tallahassee, Florida 32314

ATTN: Amendment Section

Re: McKenney Chiropractic Center, P.A., a Florida corporation

Dear Madam/Sir:

Please find enclosed an original, completed Statement of Change of Registered Office or Registered Agent or Both for Corporations for the above-referenced entity, along with a check made payable to the Florida Department of State in the sum of \$35.00 which represents your required fee to file the same. I would appreciate it if you would process the requested change at your earliest convenience.

Thank you for your assistance in this matter. Should you have any questions concerning this matter, please do not hesitate to contact me.

Sincerely,

**THE PERMENTER LAW FIRM, P.A.**

Tommy D. Permenter, Jr.

TDP/rm  
Enclosures

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: MCKENNEY CHIROPRACTIC CENTER, P.A.
2. The principal office address: 5608 S.E. 113th Street, Suite A, Belleview, FL 34420
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 12/28/2005 Document number: P05000167488
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Tommy D. Permenter, Jr., Esq.

101 S.W. Third Street

Ocala, FL 34474

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Chris W. McKenney

5608 S.E. 113th Street, Suite A

(P.O. Box NOT acceptable)

Belleview, FL 34420

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The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Chris W. McKenney  
(Signature of an officer or director)

Chris W. McKenney, President  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

Chris W. McKenney  
(Signature of Registered Agent)

7/24/06  
(Date)

If signing on behalf of an entity:

Chris W. McKenney  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*