

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000120724

FILED  
May 01, 2011  
Secretary of State

**Entity Name:** ROSS FAMILY CHIROPRACTIC, INC.

**Current Principal Place of Business:**

2525 NORTH STATE RD. 7  
215  
HOLLYWOOD, FL 33021

**New Principal Place of Business:**

2450 HOLLYWOOD BLVD.  
104  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

2525 NORTH STATE RD. 7  
215  
HOLLYWOOD, FL 33021

**New Mailing Address:**

2450 HOLLYWOOD BLVD.  
104  
HOLLYWOOD, FL 33020

**FEI Number:** 20-5581325

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSS, ANGELA S  
2525 NORTH STATE RD. 7  
SUITE 215  
HOLLYWOOD, FL 33021 US

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

ROSS, ANGELA S  
2450 HOLLYWOOD BLVD.  
104  
HOLLYWOOD, FL 33020 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:

05/01/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: ROSS, STEVEN N DR.  
Address: 2450 HOLLYWOOD BLVD.- STE 104  
City-St-Zip: HOLLYWOOD, FL 33020

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: STEVEN N. ROSS

D

05/01/2011

Electronic Signature of Signing Officer or Director

Date