

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079970

Entity Name: KEYSTONE CHIROPRACTIC INC.

FILED
May 20, 2011
Secretary of State

Current Principal Place of Business:

330 A SOUTH LAWRENCE BLVD.
KEYSTONE HEIGHTS, FL 32656 US

New Principal Place of Business:

Current Mailing Address:

330 A SOUTH LAWRENCE BLVD.
KEYSTONE HEIGHTS, FL 32656 US

New Mailing Address:

FEI Number: 26-0597032

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHAN, JINNIFER M
13300 ATLANTIC BLVD
APT 1615
JACKSONVILLE, FL 32225 US

Name and Address of New Registered Agent:

STEPHAN, JINNIFER M
9823 TAPESTRY PARK CIRCLE
UNIT 112
JACKSONVILLE, FL 32246 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: JINNIFER STEPHAN

05/20/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STEPHAN, JINNIFER M
Address: 9823 TAPESTRY PARK CIRCLE
City-St-Zip: JACKSONVILLE, FL 32246 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: JINNIFER STEPHAN

P

05/20/2011

Electronic Signature of Signing Officer or Director

Date