2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2010
Secretary of State

DOCUMENT# P08000063163

Entity Name: BEDFORD MEDICAL CHIROPRACTIC, INC.

Current Principal Place of Business:

5205 S. ORANGE AVE., STE. 102
ORLANDO, FL 32809

New Principal Place of Business:

5205 S. ORANGE AVE.,
SUITE #102
ORLANDO, FL 32809

Current Mailing Address:

5205 S. ORANGE AVE., STE. 102
ORLANDO, FL 32809

New Mailing Address:

5205 S. ORANGE AVE.,
SUITE #102
ORLANDO, FL 32809

FEI Number: 26-2892354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

VOLEY, LUDMYLAI M
5205 S. ORANGE AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

VOLCY, LUDMYLLA M
5205 S. ORANGE AVENUE
SUITE #102
ORLANDO, FL 32809 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: LUDMYLLA VOLCY 03/31/2010
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DR
Name: AUDETTE, SUE
Address: 1672 SHARPTON TRAIL
City-St-Zip: LAWRENCEVILLE, GA 30045

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: SUE AUDETTE PRES 03/31/2010
Electronic Signature of Signing Officer or Director Date