2010 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2010
Secretary of State

DOCUMENT# P09000065139

Entity Name: FT. MYERS CHIROPRACTIC CENTER INC

Current Principal Place of Business:

1840 COLLEGE PKWY
SUITE 107
FT. MYERS, FL 33919

New Principal Place of Business:

8140 COLLEGE PKWY
SUITE 107
FT. MYERS, FL 33919

Current Mailing Address:

1840 COLLEGE PKWY
SUITE 107
FT. MYERS, FL 33919

New Mailing Address:

8140 COLLEGE PKWY
SUITE 107
FT. MYERS, FL 33919

FEI Number: 27-0745385 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODRIGUEZ, LAZ D DC
1840 COLLEGE PKWY
SUITE 107
FT. MYERS, FL 33919 US

Name and Address of New Registered Agent:

RODRIGUEZ, LAZ D DC
8140 COLLEGE PKWY
SUITE 107
FT. MYERS, FL 33919 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: _____ 02/25/2010
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD
Name: RODRIGUEZ, LAZ D DC
Address: 8140 COLLEGE PKWY
City-St-Zip: FT. MYERS, FL 33919

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: LAZ D RODRIGUEZ DC P 02/25/2010
Electronic Signature of Signing Officer or Director — Date