

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000090223

FILED
Feb 10, 2011
Secretary of State

Entity Name: EDGEWOOD CHIROPRACTIC CENTER, INC

Current Principal Place of Business:

4401 S. ORANGE AVENUE
102
EDGEWOOD, FL 32806

New Principal Place of Business:

Current Mailing Address:

1352 SW 160 AVE
SUNRISE, FL 33326 US

New Mailing Address:

FEI Number: 27-1231419

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROTHERS, ANTHONY
1352 SW 160 AVE
SUNRISE, FL 33326 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: CROTHERS, ANTHONY
Address: 1352 SW 160 AVE
City-St-Zip: SUNRISE, FL 33326 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: ANTHONY CROTHERS

PRES

02/10/2011

Electronic Signature of Signing Officer or Director

Date