

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000093173

FILED
Sep 16, 2010
Secretary of State

Entity Name: SCARBOROUGH FAMILY CHIROPRACTIC, INC.

Current Principal Place of Business:

7247 STATE ROAD 52
HUDSON, FL 34667

New Principal Place of Business:

5534 GULF DR.
SUITE 3
NEW PORT RICHEY, FL 34652

Current Mailing Address:

7247 STATE ROAD 52
HUDSON, FL 34667

New Mailing Address:

5534 GULF DR.
SUITE 3
NEW PORT RICHEY, FL 34652

FEI Number: 20-4828789

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREEMAN, HERB
2787 KEYSTONE RD
TARPON SPRINGS, FL 34688 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: D
Name: SCARBOROUGH, RON
Address: 5534 GULF DR. SUITE 3
City-St-Zip: NEW PORT RICHEY, FL 34652

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: RON SCARBOROUGH

DR

09/16/2010

Electronic Signature of Signing Officer or Director

Date