

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000030905

FILED
May 01, 2011
Secretary of State

Entity Name: HASTINGS CHIROPRACTIC REHAB, INC.

Current Principal Place of Business:

740 NORTH HASTINGS STREET
ORLANDO, FL, 32808

New Principal Place of Business:

740 NORTH HASTINGS STREET
ORLANDO,, FL 32808

Current Mailing Address:

740 NORTH HASTINGS STREET
ORLANDO, FL, 32808

New Mailing Address:

P.O.BOX 585511
ORLANDO, FL 32858

FEI Number: 61-1615048

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARWELL, RHETT
616 CYPRESS OAK CIRCLE
DELAND, FL, FL 32720 US

Name and Address of New Registered Agent:

HARWELL, RHETT
616 CYPRESS OAK CIRCLE
DELAND, FL 32720 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:

05/01/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: RHETT, HARWELL
Address: 740 NORTH HASTINGS STREET
City-St-Zip: ORLANDO, FL 32808

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: RHETT HARWELL

RA

05/01/2011

Electronic Signature of Signing Officer or Director

Date