

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000042787

FILED
Mar 29, 2011
Secretary of State

Entity Name: SOUTHERN TRACE CHIROPRACTIC AND MASSAGE CENTER, PA

Current Principal Place of Business:

11834 COUNTY HIGHWAY 101
SUITE 202
THE VILLAGES, FL 32162

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 507
BELLEVIEW, FL 34420

New Mailing Address:

FEI Number: 27-2597528

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRISHAM, STEPHANIE
11834 COUNTY ROAD 101
STE 202
THE VILLAGES, FL 32162 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: PRES
Name: ZIELECKI, MICHELLE M DR.
Address: 4222 SE 107TH LANE
City-St-Zip: BELLEVIEW, FL 34420

Title: VP
Name: GRISHAM, STEPHANIE
Address: 12381 SE 102ND AVENUE
City-St-Zip: BELLEVIEW, FL 34420

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: MICHELLE ZIELECKI

PRES

03/29/2011

Electronic Signature of Signing Officer or Director

Date