

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000047153

FILED
Feb 17, 2011
Secretary of State

Entity Name: ATLANTIC CHIROPRACTIC OFFICES INC

Current Principal Place of Business:

85 SW 5TH AVENUE
102
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

2100 NE 38TH STREET
110
LIGHTHOUSE POINT, FL 33064

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HUPP, THOMAS L
2100 NE 38TH STREET
#110
LIGHTHOUSE POINT, FL 33064 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: HUPP, THOMAS L
Address: 2100 NE 38TH STREET #110
City-St-Zip: LIGHTHOUSE POINT, FL 33064

Title: MGR
Name: DORLIZIER, GETO
Address: 12102 MAHOGANY DR.
City-St-Zip: BOYNTON BEACH, FL 33436

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: GETO DORILIZIER

MGR

02/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date