

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000076520

FILED
Feb 09, 2011
Secretary of State

Entity Name: GULF COAST CHIROPRACTIC AND REHAB, P.A.

Current Principal Place of Business:

725 BALBOA AVENUE
PANAMA CITY, FL 32401

New Principal Place of Business:

1008 JENKS AVE
PANAMA CITY, FL 32401

Current Mailing Address:

725 BALBOA AVENUE
PANAMA CITY, FL 32401

New Mailing Address:

1008 JENKS AVE
PANAMA CITY, FL 32401

FEI Number: 80-0646626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PYNE, LAURA C
PYNE LAW GROUP, P.A.
1101 WEST 10TH STREET
PANAMA CITY, FL 32401 US

Name and Address of New Registered Agent:

PYNE LAW GROUP, P.A.
PYNE LAW GROUP, P.A.
1101 WEST 10TH STREET
PANAMA CITY, FL 32401 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: PYNE LAW GROUP, P.A. BY LAURA PYNE

02/09/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: JOHNSON, WESLEY
Address: 725 BALBOA AVENUE
City-St-Zip: PANAMA CITY, FL 32401

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: WESLEY JOHNSON

PRES

02/09/2011

Electronic Signature of Signing Officer or Director

Date