

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000049712

FILED
Feb 14, 2012
Secretary of State

Entity Name: STRONGLIFE CHIROPRACTIC & NATURAL HEALTH, P.A.

Current Principal Place of Business:

2939 WILLOWLEAF LANE
WESLEY CHAPEL, FL 33544 US

New Principal Place of Business:

5618 FISHHAWK CROSSING BLVD
LITHIA, FL 33544 US

Current Mailing Address:

2939 WILLOWLEAF LANE
WESLEY CHAPEL, FL 33544 US

New Mailing Address:

5618 FISHHAWK CROSSING BLVD
LITHIA, FL 33544 US

FEI Number: 45-2546807

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRY, JASON S
1311 S. HOWARD AVE.
TAMPA, FL 33606 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,D
Name: SCOTT, JUSTIN R
Address: 2939 WILLOWLEAF LANE
City-St-Zip: WESLEY CHAPEL, FL 33544 US

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: JUSTIN SCOTT

CEO

02/14/2012

Electronic Signature of Signing Officer or Director

Date