FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

APPROVED AND FILED

95 MAY -1 PM 10:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000049312 (9)

1. Corporate Name

IMMOKALEE FAMILY CHIROPRACTIC, P.A.

Principal Place of Business	Mailing Address
1218 N 15TH ST IMMOKALEE FL	1218 N 15TH ST IMMOKALEE FL

3. Date Incorporated or Qualified: 07/01/1994

4. FEI Number: 65-0563276 — Applied For / Not Applicable

5. Certificate of Status Desired — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution — $5.00 May Be Added to Fees

8. X

24	33934	25	USA	29	33934	30	USA

9. Name and Address of Current Registered Agent

~~HORWITZ, WAYNE~~
3511 WEST COMMERCIAL BLVD.
SUITE 402
FORT LAUDERDALE FL ~~33309~~

10. Name and Address of New Registered Agent

81 Name: WAYNE HORWITZ, CPA

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City — FL — 85 Zip Code: 33309

11.

12.

D-
~~MORRIS, CLIFFORD~~
~~1218 N. 15TH ST.~~
~~IMMOKALEE FL~~
DELETE

13.

DIRECTOR — X Addition
LOVELL, STEPHEN
2049 CLEVELAND AVENUE SUITE 100
FORT MYERS, FL 33901

14.

SIGNATURE: [signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/95

216 0591

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