

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000002112

FILED
Jan 14, 2009
Secretary of State

Entity Name: ESENBERG CHIROPRACTIC CENTRE, P.A.

Current Principal Place of Business:

24426 STATE ROAD 54
LUTZ, FL 33559

New Principal Place of Business:

Current Mailing Address:

PO BOX 979
LAND O LAKES, FL 34639

New Mailing Address:

FEI Number: 59-3284435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESENBERG, SCOTT
3431 PARKWAY BLVD
LAND O'LAKES, FL 34639 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESENBERG, SCOTT
Address: 3431 PARKWAY BLVD
City-St-Zip: LAND O'LAKES, FL 34639

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SCOTT C. ESENBERG

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date