

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000038958

FILED  
Jan 08, 2010  
Secretary of State

Entity Name: ALAN J. SCHWARTZ, D.C., P.A.

## Current Principal Place of Business:

897 E. SEMORAN BLVD.  
CASSELBERRY, FL 32707

## New Principal Place of Business:

## Current Mailing Address:

897 E. SEMORAN BLVD.  
CASSELBERRY, FL 32707

## New Mailing Address:

FEI Number: 59-3324170

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEWIN, KARL  
897 E. SEMORAN BLVD.  
CASSELBERRY, FL 32707 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: D  
Name: LEWIN, KARL  
Address: 897 E. SEMORAN BLVD.  
City-St-Zip: CASSELBERRY, FL 32707

Title: P  
Name: LEWIN, KARL  
Address: 897 E. SEMORAN BLVD.  
City-St-Zip: CASSELBERRY, FL 32707

Title: S  
Name: LEWIN, KARL  
Address: 897 E. SEMORAN BLVD.  
City-St-Zip: CASSELBERRY, FL 32707

Title: T  
Name: LEWIN, KARL  
Address: 897 E. SEMORAN BLVD.  
City-St-Zip: CASSELBERRY, FL 32707

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: KARL LEWIN

PRES

01/08/2010

Electronic Signature of Signing Officer or Director

Date