

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000088956

FILED
Jan 11, 2012
Secretary of State

Entity Name: SPECIFIC CARE CHIROPRACTIC, INC.

Current Principal Place of Business:

1159 HOMESTEAD RD.
LEHIGH ACRES, FL 33936

New Principal Place of Business:

3020 LEE BLVD.
SUITE # 11
LEHIGH ACRES, FL 33971

Current Mailing Address:

1159 HOMESTEAD RD.
LEHIGH ACRES, FL 33936

New Mailing Address:

3020 LEE BLVD.
SUITE # 11
LEHIGH ACRES, FL 33971

FEI Number: 65-0620894

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECK, JEFFREY M
3949 EVANS AVE
403
FORT MYERS, FL 33901 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: DPST
Name: PECK, JEFFREY M
Address: 3949 EVANS AVE 403
City-St-Zip: FORT MYERS, FL 33901 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: JEFF PECK

PRES

01/11/2012

Electronic Signature of Signing Officer or Director

Date