2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000108195

FILED Apr 07, 2008 Secretary of State

Entity Nar	ne: FIRST CA	ARE CHIROPRACTIC CENTE	R, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
STE D	AK RIDGE RD), FL 32809						
Current Mailing Address:			New Maili	New Mailing Address:			
STE D	AK RIDGE RD), FL 32809						
FEI Number:	59-3488409	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of	New Registered Agent:		
	LLIAM J DCOCK RD, SI D, FL 32803	UITE 223 US	334 SÓUTI SUITE B	DIETZ, WILLIAM J 334 SOUTH WYMORE RD. SUITE B WINTER PARK, FL 32789 US			
	named entity s e of Florida.	submits this statement for the p	ourpose of changing i	ts registered	office or registered agent, or	ooth,	
SIGNATURE:				04/07/2008			
	Electron	ic Signature of Registered Ag	ent		Date		
Election Can	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	D () EDMONDSON, 623 CAREY WA ORLANDO, FL	Υ	Title: Name: Address: City-St-Zip:	D AUXILA, JEA 1601 CELLE KISSIMMEE,	NY COURT		
Title: Name: Address: City-St-Zip:	D (X) AUXILA, JEAN I 1601 CELLENY KISSIMMEE, FL	COURT	Title: Name: Address: City-St-Zip:		()Change ()Addition		

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: JEAN F. AUXILA 04/07/2008 D