2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006
Secretary of State

DOCUMENT# P98000001710

Entity Name: SIESTA CHIROPRACTIC, P.A.

Current Principal Place of Business:

7222 S. TAMIAMI TRL
STE 104
SARASOTA, FL 34231 US

New Principal Place of Business:

5640 MARQUESAS CIRCLE
SARASOTA, FL 34233 US

Current Mailing Address:

7222 S. TAMIAMI TRL
STE 104
SARASOTA, FL 34231 US

New Mailing Address:

5640 MARQUESAS CIRCLE
SARASOTA, FL 34233 US

FEI Number: 65-0802462 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAJERCIN, DAVID M
7222 S. TAMIAMI TRL
#104
SARASOTA, FL 34231 US

Name and Address of New Registered Agent:

MAJERCIN, DAVID M
5640 MARQUESAS CIRCLE
SARASOTA, FL 34233 US

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: DAVID MAJERCIN 03/30/2006
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MAJERCIN, DAVID M
Address: 2268 GULF GATE DRIVE
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: MAJERCIN, DAVID M
Address: 5640 MARQUESAS CIRCLE
City-St-Zip: SARASOTA, FL 34233

I hereby certify that the information supplied with this filing does not qualify for the 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: DAVID MAJERCIN D 03/30/2006
Electronic Signature of Signing Officer or Director Date