

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000022821

**FILED**  
**Apr 26, 2006**  
**Secretary of State**

**Entity Name:** MARCI LYN MEYEROWICH, D.C., P.A.

**Current Principal Place of Business:**

2535 BURNS ROAD  
OAKS CENTER  
PALM BEACH GARDENS, FL 33410

**New Principal Place of Business:**

**Current Mailing Address:**

2535 BURNS ROAD  
OAKS CENTER  
PALM BEACH GARDENS, FL 33410

**New Mailing Address:**

**FEI Number:** 65-0819293      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MEYEROWICH, MARCI LYN  
2535 BURNS ROAD, OAKS CENTER  
PALM BEACH GARDENS, FL 33410    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                    ( ) Delete  
**Name:** MEYEROWICH, MARCI LYN  
**Address:** 2535 BURNS ROAD, OAKS CENTER  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

**Title:** DR                    (X) Change ( ) Addition  
**Name:** MEYEROWICH, MARCI LYN  
**Address:** 2535 BURNS ROAD, OAKS CENTER  
**City-St-Zip:** PALM BEACH GARDENS, FL 33410

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: MARCI LYN MEYEROWICH

DR

04/26/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date