

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000063001

FILED
Apr 28, 2011
Secretary of State

Entity Name: FLORIDA CHIROPRACTIC CLINIC P.A. GROUP

Current Principal Place of Business:

3230 E. 15TH STREET
SUITE C
PANAMA CITY, FL 32405

New Principal Place of Business:

6029 EAST HIGHWAY 98
PANAMA CITY, FL 32404

Current Mailing Address:

3230 E. 15TH STREET, SUITE C
SUITE C
PANAMA CITY, FL 32405

New Mailing Address:

6029 EAST HIGHWAY 98
PANAMA CITY, FL 32404

FEI Number: 59-3523209

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELION, ISA DC
3230 E. 15TH STREET, SUITE C
SUITE C
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

BELION, ISA DC
6029 EAST HIGHWAY 98
PANAMA CITY, FL 32404 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: ISA BELION

04/28/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: BELION, ISA
Address: 6029 EAST HIGHWAY 98
City-St-Zip: PANAMA CITY, FL 32404

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: ISA BELION

DR

04/28/2011

Electronic Signature of Signing Officer or Director

Date