## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P98000105274

Entity Name: COMPLETE CHIROPRACTIC CARE, P.A.

FILED Jan 09, 2012 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
100 MARCIA DRIVE. ALTAMONTE SPRINGS,, FL 32714	
Current Mailing Address:	New Mailing Address:
1671 BERKSHIRE AVE WINTER PARK, FL 32789	
FEI Number: 59-3548399 FEI Number Applied For ( )	FEI Number Not Applicable ( ) Certificate of Status Desired ( )
Name and Address of Current Registered Agent:	Name and Address of New Registered Agent:
GILBERT, JANET E 100 MARCIA DRIVE ALTAMONTE SPRINGS,, FL 32714 US	
Γhe above named entity submits this statement for the ρι n the State of Florida.	surpose of changing its registered office or registered agent, or both
BIGNATURE:	
Electronic Signature of Registered Age	ent Date

## **OFFICERS AND DIRECTORS:**

Title: DF

Name: GILBERT, JANET E Address: 100 MARCIA DRIVE

City-St-Zip: ALTAMONTE SPRINGS,, FL 32714

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: JANET E. GILBERT P 01/09/2012