2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jul 17, 2012
Secretary of State

DOCUMENT# P99000028271

Entity Name: EAST HILL CHIROPRACTIC CENTER, INC.

Current Principal Place of Business:

2045 N 12TH AVE
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

2045 N 12TH AVE
PENSACOLA, FL 32503

New Mailing Address:

FEI Number: 59-3568297 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOGAN, SHAWNA
2045 NORTH 12TH AVE
PENSACOLA, FL 32503 US

Name and Address of New Registered Agent:

HOGAN, KEVIN M D.C.
2045 NORTH 12TH AVE
PENSACOLA, FL 32503 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: KEVIN M. HOGAN, D.C. 07/17/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PT
Name: HOGAN, KEVIN M D.C.
Address: 2045 NO 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503 US

Title: VS
Name: HOGAN, CHERI
Address: 2045 NO 12TH AVENUE
City-St-Zip: PENSACOLA, FL 32503

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: KEVIN M. HOGAN, D.C. PRES 07/17/2012
Electronic Signature of Signing Officer or Director Date