

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000043330

FILED
Mar 02, 2012
Secretary of State

Entity Name: ARMSTRONG CHIROPRACTIC FAMILY CENTER, INC.

Current Principal Place of Business:

1401 N ATLANTIC AV
COCOA BEACH, FL 32931

New Principal Place of Business:

1401 N. ATLANTIC AVE
COCOA BEACH, FL 32931

Current Mailing Address:

1401 N ATLANTIC AV
COCOA BEACH, FL 32931

New Mailing Address:

1401 N. ATLANTIC AVE
COCOA BEACH, FL 32931

FEI Number: 59-3578278

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARMSTRONG, ORLAND III
1401 N ATLANTIC AV
COCOA BEACH, FL 32931 US

Name and Address of New Registered Agent:

ARMSTRONG, ORLAND K III
1401 N. ATLANTIC AVE
COCOA BEACH, FL 32931 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: ORLAND K. ARMSTRONG, III

03/02/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR
Name: ARMSTRONG, ORLAND K III
Address: 1401 N. ATLANTIC AVE
City-St-Zip: COCOA BEACH, FL 32931

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: ORLAND K. ARMSTRONG, III

DR.

03/02/2012

Electronic Signature of Signing Officer or Director

Date