

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S16148

FILED
Apr 17, 2012
Secretary of State

Entity Name: MIDDLEBURG CHIROPRACTIC CENTER, P.A.

Current Principal Place of Business:

4235 COUNTY RD 218
MIDDLEBURG, FL 32068 US

New Principal Place of Business:

Current Mailing Address:

4235 COUNTY RD 218
MIDDLEBURG, FL 32068 US

New Mailing Address:

FEI Number: 59-3038978

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, ANTHONY
2710 BLANDING BLVD
STE 5
MIDDLEBURG, FL 32068 US

Name and Address of New Registered Agent:

SMITH, ROBERT A DC
4235 COUNTY RD 218
MIDDLEBURG, FL 32068 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: ROBERT A SMITH, DC

04/17/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D
Name: SMITH, ROBERT A DC
Address: 4235 COUNTY RD 218
City-St-Zip: MIDDLEBURG, FL 32068

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: ROBERT A SMITH, DC

D

04/17/2012

Electronic Signature of Signing Officer or Director

Date