FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

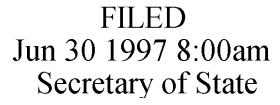
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V28240

(2)

CHIROMED CHIROPRACTIC CENTER, INC.





Principal Place P.O. BOX 1529 TAMPA FL 336		Mailing Address P.O. BOX 152517 TAMPA FL 33684-2517						
						3. Date Incorporated or Qualified 04/13/1992	3a. Date of La 04/24/199	
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	<u> </u>	Applied For
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Dosired \$8.75 Additional		
22 27 27 City & State City & St			State			Fee Required		
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip	Coun	itry		8. This corporation has liability for	intangible tax und	
24	9. Name and Address of Current	29 Registered Agent	30			Florida Statutes 10, Name and Address of New R	Yes No	
HAF	RDT, JAMES SR.			B1	Name		- Mistorios Agorit	
2117 WEST OKALOOSA AVE.				B2	Street Ad	et Address (P.O. Box Number is Not Acceptable)		
TAMPA FL 33604				33		,		
				⅃.	03			
<u> </u>					City		FL I	Zip Code
) Office of r	to the provisions of Sections 607 0502 registered agent, or both, in the State of manifer with, and accept the obligat	f Florida. Such change was	authorized	by I	named co the corpor	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changir pt the appointment	ng its registered t as registered
SIGNATURE	Signature, typed or printed hame of registered agent		TE: Registered	Ageni	t signature req	quired wher: reinstating)	DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF		
TITLE NAME	PD Brown, Harry W.	DELETÉ	1.1 7(1)				∐ Chan	ge L. Additron
STREET ADDRESS	750 MORROW INDUSTRIAL BLV	D.	1.2 NAM		DDRESS			
CITY-ST-ZIP	JONESBORO GA 30236		1.4 CITY				•	
TITLE	S	☐ DELETE	2.1 1111				☐ Chan	ge Addition
NAME	BROWN, NANCY	_	2 2 NAM	1E				
STREET ADDRESS	750 MORROW INDUSTRIAL BLV	D.	2.3 STRI					
CITY-ST-ZIP TITLE	JONESBORO GA 30236	DELETE	2. 4 CIT		- ZIP		☐ Chan	ge 🔲 Addition
NAME	MANGELSDOF, KENNETH J.	_ out it	3.1 HILL 3.2 NAM				L Grid:i	Re i'T vaningu
STREET ADDRESS	8 CHESTY PLACE		3.3 STRE		DDRESS			
CITY-ST-ZIP	SAVANNAH GA	<u>.</u>	3.4. CI11	y - SI	- ZIP			
TITLE		DELETE	4.1 701L	E			Chan	ge 🔲 Addition
NAME			4. 2 NAN					
STREET ADDRESS			4.3 STRE					
CITY-ST-ZIP TITLE		DELETE	4.4 CITY 5.1 TITLE		ZIP		☐ Chan	ge Addition
NAME		— Descrip	5 2 NAM				Citali	90 LINORIUI
STREET ADDRESS			5.3 STRE		DDRESS			
CITY-ST-ZIP			5.4 CITY					
TITLE		DELETE	6.1 TITLE	F			☐ Chan	ge Addition
NAME			6.2 NAM	E				
STREET ADORESS		-	6.3 STRE		1			
CITY-ST-ZIP	by certify that the information supplied	with this filling does not avail	BACITY But the			ed in Section 119.07(3)(i). Florida Statute	n i further and a	not the
*** . UU ! IU U	/ Serios due dio montendente de 60000000000000000000000000000000000	THE THE PART OF THE STREET CHARLES	COLUMN II II II E AND	- 11 (i)	oanari SiHli	arar webbi i muzikini bidha Sigiilo	 Lumber Corum 11 	150 100

acculate and that my signature shall have the same legal effect as if made under oath; that execute this report as required by Chapter 607, Florida Statutes; and that my name