

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 587535

Entity Name: CHIROPRACTIC ASSOCIATES OF GAINESVILLE,
RICHESONAND SUGGS, P.A.

Current Principal Place of Business:

3703 SW 13TH STREET
GAINESVILLE, FL 32608

Current Mailing Address:

3703 SW 13TH STREET
GAINESVILLE, FL 32608

FEI Number: 59-1856700

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RICHESON, MATTHEW OR MATT CLINE
3703 SW 13TH STREET
GAINESVILLE, FL 32608 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	VST
Name	RICHESON, MATTHEW	Name	CLINE, MATTHEW
Address	3703 SW 13TH ST	Address	3703 SW 13TH ST
City-State-Zip:	GAINESVILLE FL 32608	City-State-Zip:	GAINESVILLE FL

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: MATTHEW RICHESON

PRESIDENT

03/02/2015

Electronic Signature of Signing Officer/Director Detail

Date