2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2018
Secretary of State
CC8074762327

DOCUMENT# M85790

Entity Name: COOPER CHIROPRACTIC AND NEUROLOGICAL DIAGNOSTIC CENTER, P.A.

Current Principal Place of Business:

1501 ROBERT J CONLAN BLVD NE
SUITE #3
PALM BAY, FL 32905

Current Mailing Address:

1501 ROBERT J CONLAN BLVD NE
SUITE #3
PALM BAY, FL 32905 US

FEI Number: 59-2895599

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COOPER, STANTON T.
1501 ROBERT J CONLAN BLVD NE
SUITE #3
PALM BAY, FL 32905 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: STANTON T. COOPER 04/27/2018

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRESIDENT	Title	DIRECTOR
Name	COOPER, STANTON T.	Name	COOPER, STANTON T.
Address	1501 ROBERT J CONLAN BLVD NE SUITE #3	Address	1501 ROBERT J CONLAN BLVD NE SUITE #3
City-State-Zip:	PALM BAY FL 32905	City-State-Zip:	PALM BAY FL 32905

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: STANTON T. COOPER PRESIDENT 04/27/2018

Electronic Signature of Signing Officer/Director Detail — Date