

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000023391

Entity Name: BELLEVIEW CHIROPRACTIC CLINIC, P.A.

Current Principal Place of Business:

10341 SE HWY. 441/27
BELLEVIEW, FL 34420

Current Mailing Address:

13041 SE HWY. 441/27
BELLEVIEW, FL 34420 US

FEI Number: 59-3713027

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZIELECKI, MICHELLE M.
10341 SE HWY. 441/27
BELLE VIEW, FL 34420 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: MICHELLE M. ZIELECKI

01/25/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT

Name ZIELECKI, MICHELLE M.

Address 10341 SE HWY. 441/27

City-State-Zip: BELLEVIEW FL 34420

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: MICHELLE ZIELECKI

OWNER

01/25/2024

Electronic Signature of Signing Officer/Director Detail

Date