2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 22, 2013
Secretary of State
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Entity Name: DEERWOOD LAKE CHIROPRACTIC, INC.

Current Principal Place of Business:

4540 SOUTHSIDE BLVD
1101
JACKSONVILLE, FL 32216

Current Mailing Address:

4540 SOUTHSIDE BLVD
1101
JACKSONVILLE, FL 32216 US

FEI Number: 20-3606341

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FORT, ANTHONY PD.C.
3530 BRIDGEWOOD DR
JACKSONVILLE, FL 32277 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	D.C.
Name	FORT, ANTHONY AD.C.
Address	3530 BRIDGEWOOD DR
City-State-Zip:	JACKSONVILLE FL 32277

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: ANTHONY FORT D.C., 03/22/2013

Electronic Signature of Signing Officer/Director Detail — Date