### 2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000026225

Entity Name: BRACKEN FAMILY CHIROPRACTIC CENTER, P.A.

FILED
Mar 18, 2024
Secretary of State
8610767173CC

## **Current Principal Place of Business:**

461 KINGSLEY AVE ORANGE PARK. FL 32073

# **Current Mailing Address:**

**461 KINGSLEY AVE** 

ORANGE PARK, FL 32073 US

FEI Number: 20-4368398 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

BRACKEN, STACI L DR. 461 KINGSLEY AVE ORANGE PARK, FL 32073 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: STACI L. BRACKEN 03/18/2024

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PSTD

Name BRACKEN, STACI L DR. Address 461 KINGSLEY AVE

City-State-Zip: ORANGE PARK FL 32073

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.

DR.

Electronic Signature of Signing Officer/Director Detail