

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000046617

Entity Name: ADVANCEDCARE CHIROPRACTIC P.A.

Current Principal Place of Business:

115 MARGARET STREET
SUITE F
BRANDON, FL 33511

Current Mailing Address:

115 MARGARET STREET
SUITE F
BRANDON, FL 33511

FEI Number: 22-3927986

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WAGES, DAVID JPSTD
115 MARGARET ST
SUITE F
BRANDON, FL 33511 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 PSTD
Name WAGES, DAVID JD.C.
Address 115 MARGARET ST , SUITE F
City-State-Zip: BRANDON FL 33511

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: DAVID WAGES, DC

PSTD

03/21/2014

Electronic Signature of Signing Officer/Director Detail

Date