## 2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000079970

Entity Name: KEYSTONE CHIROPRACTIC INC.

**Current Principal Place of Business:** 

330 A SOUTH LAWRENCE BLVD. KEYSTONE HEIGHTS. FL 32656

**Current Mailing Address:** 

330 A SOUTH LAWRENCE BLVD. KEYSTONE HEIGHTS, FL 32656 US

FEI Number: 26-0597032 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

STEPHAN, JINNIFER M 2208 WIDE REACH DRIVE FLEMING ISLAND, FL 32003-8655 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: JINNIFER M. STEPHAN 04/05/2020

Electronic Signature of Registered Agent

Date

FILED Apr 05, 2020

**Secretary of State** 

8392433606CC

## Officer/Director Detail:

Title F

Name STEPHAN, JINNIFER M
Address 2208 WIDE REACH DRIVE

City-State-Zip: FLEMING ISLAND FL 32003-8655

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.