

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P97000065904

**Entity Name:** COLONIAL CHIROPRACTIC, INC.

**Current Principal Place of Business:**

2475 ROUND TABLE CT.  
FT. MYERS, FL 33912

**Current Mailing Address:**

1570-B COLONIAL BLVD  
FORT MYERS, FL 33907 US

**FEI Number:** 65-0771863

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

VASCONCELLOS, JOSE C  
2475 ROUND TABLE CT  
FORT MYERS, FL 33912 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 P  
Name VASCONCELLOS, JOSE C  
Address 2475 ROUND TABLE CT.  
City-State-Zip: FT. MYERS FL 33912

Title V  
Name VASCONCELLOS, DORIS R  
Address 2475 ROUND TABLE CT.  
City-State-Zip: FT. MYERS FL 33912

Title T  
Name VASCONCELLOS, CHRISTIAN  
Address 2475 ROUND TABLE CT.  
City-State-Zip: FT. MYERS FL 33912

*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:** JOSE C VASCONCELLOS ,

P

01/18/2013

Electronic Signature of Signing Officer/Director Detail

Date