

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000087989

FILED
Feb 17, 2012
Secretary of State

Entity Name: ORLANDO FAMILY CHIROPRACTIC, LLC

Current Principal Place of Business:

500 N. MILLS AVENUE
ORLANDO, FL 32803

New Principal Place of Business:

500 N. MILLS AVENUE
SUITE A
ORLANDO, FL 32803

Current Mailing Address:

500 N. MILLS AVENUE
ORLANDO, FL 32803

New Mailing Address:

500 N. MILLS AVENUE
SUITE A
ORLANDO, FL 32803

FEI Number: 27-0731185

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLANDER, DARREN
1008 S. MILLS AVENUE
ORLANDO, FL 32806 US

Name and Address of New Registered Agent:

HOLLANDER, DARREN
1008 S. MILLS AVENUE
C
ORLANDO, FL 32806 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

02/17/2012

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: HOLLANDER, DARREN
Address: 1008 S. MILLS AVENUE
City-St-Zip: ORLANDO, FL 32806

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DARREN HOLLANDER

CEO

02/17/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date