

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000130742

FILED
Apr 30, 2012
Secretary of State

Entity Name: ADVANCED CHIROPRACTIC HEALTH AND AWARENESS CENTER, LLC

Current Principal Place of Business:

4313 19TH PLACE SW
NAPLES, FL 34116

New Principal Place of Business:

860 111TH AVE. N
SUITE #7
NAPLES, FL 34108

Current Mailing Address:

4313 19TH PLACE SW
NAPLES, FL 34116

New Mailing Address:

860 111TH AVE N
SUITE #7
NAPLES, FL 34108

FEI Number: 45-3822797

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUSH, ROBERT E
14750 INDIGO LAKES CIRCLE
NAPLES, FL 34119 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: BERGTOLD, MATTHEW R
Address: 4313 19TH PLACE SW
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM
Name: BERGTOLD, RITA L
Address: 19TH PLACE SW
City-St-Zip: NAPLES, FL 34116 US

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: MATTHEW BERGTOLD

MGRM

04/30/2012

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