2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 15, 2013
Secretary of State
CC6662597694

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Entity Name: ALL ACCIDENTS CHIROPRACTIC CENTER, PLLC

Current Principal Place of Business:

2516 34TH STREET SOUTH
ST PETERSBURG, FL 33712

Current Mailing Address:

2516 34TH STREET SOUTH
ST PETERSBURG, FL 33712

FEI Number: 27-1872326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LA ROCCA, BLAKE
1960 CLEVELAND STREET
CLEARWATER, FL 33765 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

Authorized Person(s) Detail :

Title	MGR
Name	MICHAEL LAROCCA
Address	1986 SPANISH PINES DR.
City-State-Zip:	DUNEDIN FL 34598

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 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; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL LAROCCA D.C. MANAGER 01/15/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date