## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000057187

**Entity Name: COFFEY CHIROPRACTIC LLC** 

ity Name: Correr Crimor NACTIC LE

Current Principal Place of Business: 2700 S TAMIAMI TRAIL

SUITE 17 SARASOTA, FL 34239

## **Current Mailing Address:**

2700 S TAMIAMI TRAIL SUITE 17 SARASOTA, FL 34239 US

FEI Number: 46-5331373 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

COFFEY, GEORGE N III 2700 S TAMIAMI TRAIL SUITE 17 SARASOTA, FL 34239 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

FILED Apr 10, 2019

**Secretary of State** 

7632370778CC

## Authorized Person(s) Detail:

Title DR

Name COFFEY, GEORGE N III
Address 2700 S TAMIAMI TRAIL
City-State-Zip: SARASOTA FL 34239

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