

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000457742

Entity Name: 657 CHIROPRACTIC PLLC

Current Principal Place of Business:

657 SE CENTRAL PARKWAY
STUART, FL 34994

Current Mailing Address:

657 SE CENTRAL PARKWAY
STUART, FL 34994 US

FEI Number: 93-3893326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EVANS, JEANNE M DR
3981 NE SUGARHILL AVENUE
JENSEN BEACH, FL 34957 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 MASTELLONE, JAMES DR
Address 8315 GOVERNORS WAY
City-State-Zip: HOBE SOUND FL 33455

Title MGR
Name EVANS, JEANNE DR
Address 3981 NE SUGARHILL AVE.
City-State-Zip: JENSEN BEACH FL 34957

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.

SIGNATURE: JEANNE EVANS

MGR

03/19/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date