## 2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000006636

Entity Name: 100% CHIROPRACTIC TAMPA 1, LLC

**Current Principal Place of Business:** 

9906 W. LINEBAUGH AVENUE

TAMPA, FL 33626

**Current Mailing Address:** 

9906 W. LINEBAUGH AVENUE TAMPA. FL 33626

FEI Number: 46-2919985 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAWFORD, CHRISTOPHER D.C. 9906 W. LINEBAUGH AVENUE TAMPA, FL 33626 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 Title MGR

Name CRAWFORD, CHRISTOPHER D.C. Name HELFRICH, JASON D.C.

Address 9906 W. LINEBAUGH AVENUE Address 110 SOUTH WEBER STREET, SUITE

104

City-State-Zip: TAMPA FL 33626

City-State-Zip: COLORADO SPRINGS CO 80903

Title MGR

Name HELFRICH, VANESSA D.C.

Address 110 SOUTH WEBER STREET, SUITE

104

City-State-Zip: COLORADO SPRINGS CO 80903

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: JASON HELFRICH, D.C.

**MANAGER** 

03/02/2015

FILED Mar 02, 2015

**Secretary of State** 

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