

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000009038

FILED
Apr 16, 2008
Secretary of State

Entity Name: MERRITT CHIROPRACTIC LLC

Current Principal Place of Business:

170 PORT SAINT LUCIE BLVD.
PORT SAINT LUCIE, FL 34984

New Principal Place of Business:

Current Mailing Address:

170 PORT SAINT LUCIE BLVD.
PORT SAINT LUCIE, FL 34984

New Mailing Address:

FEI Number: 05-0595136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERRITT, ROBERT B
170 SW PORT ST. LUCIE BLVD
PORT ST. LUCIE, FL 34984 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 () Delete
Name: MERRITT, ROBERT B
Address: 9506 SE KARIN ST
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: MERRITT, ROBERT B
Address: 170 SW PORT SAINT LUCIE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34984

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: ROBERT B. MERRITT

PRES

04/16/2008

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