

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000096963

Entity Name: FLORIDA CHIROPRACTIC LLC

FILED
Apr 04, 2006
Secretary of State

Current Principal Place of Business:

5347 NW ALAM CIRCLE
PORT ST LUCIE, FL 34986

New Principal Place of Business:

693 SW PORT ST. LUCIE BLVD.
PORT ST LUCIE, FL 34953

Current Mailing Address:

5347 NW ALAM CIRCLE
PORT ST LUCIE, FL 34986

New Mailing Address:

693 SW PORT ST. LUCIE BLVD.
PORT ST LUCIE, FL 34953

FEI Number: 20-3590880

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KELLY, MICHAEL
5347 NW ALAM CIRCLE
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

KELLY, MICHAEL
693 SW PORT ST. LUCIE BLVD.
PORT ST LUCIE, FL 34953 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: MICHAEL T. KELLY

04/04/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MICHAEL T KELLY DC P, A
Address: 3233 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: MGRM () Delete
Name: MARK S MAIER DC PA,
Address: 693 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MICHAEL T KELLY DC P, A
Address: 693 SW PORT ST LUCIE BLVD
City-St-Zip: PORT ST LUCIE, FL 34953

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: MICHAEL T. KELLY

MGR

04/04/2006

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