

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jan 09, 2011
Secretary of State

Entity Name: CARLE CHIROPRACTIC CLINIC, PLLC

Current Principal Place of Business:

5664 BEE RIDGE ROAD
100
SARASOTA, FL 34233

New Principal Place of Business:

Current Mailing Address:

5664 BEE RIDGE RD.
#100
SARASOTA, FL 34233

New Mailing Address:

5664 BEE RIDGE ROAD
100
SARASOTA, FL 34233

FEI Number: 20-3992415

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOORE, JOHN L
200 S ORANGE AVE
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

CARLE, KENNETH D
3216 WALTER TRAVIS DRIVE
SARASOTA, FL 34240 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: KENNETH D. CARLE

01/09/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: CARLE, KENNETH
Address: 5664 BEE RIDGE RD.
City-St-Zip: SARASOTA, FL 34233

I hereby 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: KENNETH CARLE

PRES

01/09/2011

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