

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000050028

FILED
Apr 28, 2008
Secretary of State

Entity Name: CLEARWATER CHIROPRACTIC CENTER, LLC

Current Principal Place of Business:

4625 EAST BAY DRIVE
SUITE #301
CLEARWATER, FL 33764

New Principal Place of Business:

25400 US HIGHWAY 19 NORTH
SUITE # 112
CLEARWATER, FL 33763

Current Mailing Address:

4625 EAST BAY DRIVE
SUITE #301
CLEARWATER, FL 33764

New Mailing Address:

25400 US HIGHWAY 19 NORTH
SUITE# 112
CLEARWATER, FL 33763

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRUNSTEIN, JARRETT
1818 SUNSET POINT ROAD
APT# B
CLEARWATER, FL 33765 US

Name and Address of New Registered Agent:

GRUNSTEIN, JARRETT B DR.
221 LAKE AVE
APT 407
LARGO, FL 33771 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: DR. JARRETT B. GRUNSTEIN

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GRUNSTEIN, JARRETT
Address: 1818 SUNSET POINT ROAD APT. B
City-St-Zip: CLEARWATER, FL 33765

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GRUNSTEIN, JARRETT B DR.
Address: 221 LAKE AVE, APT 407
City-St-Zip: LARGO, FL 33771

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: JARRETT B. GRUNSTEIN

DR.

04/28/2008

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