2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000061935

Entity Name: CHIROPRACTIC CARE AND REHAB CENTER, LLC

FILED Feb 18, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9250 CORKSCREW RD., SUITE 4 9250 CORKSCREW RD., SUITE 4

ESTERO, FL 33928 ÚS

Current Mailing Address: New Mailing Address:

9250 CORKSCREW RD., SUITE 4 9250 CORKSCREW RD., SUITE 4

ESTERO, FL 33928 US

FEI Number: 20-5022945 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GIROUX, DAVID W
19123 VINTAGE TRACE CIRCLE
GIROUX, DAVID W
19123 VINTAGE TRACE CIRCLE

FT. MYERS, FL 33912 US FT. MYERS, FL 33967 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: DAVID W. GIROUX 02/18/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition Name: GIROUX GREEN, MICHELLE M D.C. Name: GIROUX GREEN, MICHELLE M D.C.

 Name
 GROOX GREEN, MICHELLE M B.C.
 Name
 GROOX GREEN, MICHELLE M B.C.

 Address:
 13888 CLETO DR
 Address:
 13888 CLETO DR

 City-St-Zip:
 ESTERO, FL 33928
 City-St-Zip:
 ESTERO, FL 33928 US

Title: MGR () Delete Title: MGR (X) Change () Addition Name: GREEN, CHRISTOPHER M D.C. Name: GREEN, CHRISTOPHER M D.C.

 Address:
 13888 CLETO DR
 Address:
 13888 CLETO DR

 City-St-Zip:
 ESTERO, FL 33928
 City-St-Zip:
 ESTERO, FL 33928 US

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: MICHELLE GIROUX GREEN MGR 02/18/2009