

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000101278

FILED
Jan 04, 2011
Secretary of State

Entity Name: CARTER CHIROPRACTIC AND WELLNESS, L.L.C.

Current Principal Place of Business:

2180 IMMOKALEE ROAD
SUITE 206
NAPLES, FL 34110 US

New Principal Place of Business:

Current Mailing Address:

2180 IMMOKALEE ROAD
SUITE 206
NAPLES, FL 34110 US

New Mailing Address:

FEI Number: 20-5764299

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, SUSAN M
181 GRAND OAKS WAY APT. 201
NAPLES, FL 34110 US

Name and Address of New Registered Agent:

CARTER, SUSAN M
311 SADDLEBROOK LANE
NAPLES, FL 34110 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: SUSAN M CARTER

01/04/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: CARTER, SUSAN M
Address: 311 SADDLEBROOK LANE
City-St-Zip: NAPLES, FL 34110

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: SUSAN M CARTER

DR

01/04/2011

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