

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000072066

FILED
Mar 06, 2010
Secretary of State

Entity Name: SYNERGY CHIROPRACTIC AND WELLNESS SOLUTIONS, LLC

Current Principal Place of Business:

843 STATE ROAD 44
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

140 WALLACE ROAD
NEW SMYRNA BEACH, FL 32168 US

Current Mailing Address:

843 STATE ROAD 44
NEW SMYRNA BEACH, FL 32168

New Mailing Address:

PO BOX 740
NEW SMYRNA BEACH, FL 32170

FEI Number: 26-0524349

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALSH, DONALD
843 STATE ROAD 44
NEW SMYRNA BEACH, FL 32168 US

Name and Address of New Registered Agent:

WALSH, DONALD
140 WALLACE ROAD
NEW SMYRNA BEACH, FL 32168 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: _____

03/06/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGMR
Name: WALSH III, DONALD B DC
Address: 140 WALLACE ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

Title: MGMR
Name: WALSH JR, DONALD
Address: 140 WALLACE ROAD
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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: DON WALSH

VP

03/06/2010

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