

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050976

FILED
Apr 26, 2010
Secretary of State

Entity Name: FAMILY CHIROPRACTIC OF HAINES CITY, L.L.C.

Current Principal Place of Business:

1015 JONES AVENUE
HAINES CITY, FL 33844 US

New Principal Place of Business:

1452 OAKFIELD DRIVE
BRANDON, FL 33511 US

Current Mailing Address:

P.O. BOX 1302
VALRICO, FL 33595 US

New Mailing Address:

FEI Number: 71-1044743 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

RICH-CONSIGLIO, LINDA
1128 LUMSDEN TRACE CIRCLE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

FREDERICK T. LOWE, ESQ.
107 S. BRADFORD AVENUE
TAMPA, FL 33609 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: FREDERICK T. LOWE, ESQ.

04/26/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RICH-CONSIGLIO, LINDA
Address: PO BOX 1302
City-St-Zip: VALRICO, FL 33595 US

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: LINDA RICH-CONSIGLIO

MGRM

04/26/2010

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