2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2010
Secretary of State

DOCUMENT# L08000050999

Entity Name: LONG FAMILY CHIROPRACTIC CENTER, LLC

Current Principal Place of Business:

612 N THORTON AVE, C
ORLANDO, FL 32803

New Principal Place of Business:

604 N. THORNTON AVE
ORLANDO, FL 32803

Current Mailing Address:

612 N THORTON AVE, C
ORLANDO, FL 32803

New Mailing Address:

604 N. THORNTON AVE
ORLANDO, FL 32803

FEI Number: 11-3841077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NGUYEN, YEN K
581 SABAL LAKE DR.
205
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: D.C.
Name: NGUYEN, YEN
Address: 604 N. THORNTON AVE
City-St-Zip: ORLANDO, FL 32803

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 Statues.

SIGNATURE: YEN K. NGUYEN D.C. 02/16/2010

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