

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000050999

FILED
Feb 02, 2012
Secretary of State

Entity Name: LONG FAMILY CHIROPRACTIC CENTER, LLC

Current Principal Place of Business:

604 N. THORNTON AVE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

604 N. THORNTON AVE
ORLANDO, FL 32803

New Mailing Address:

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
505 SUNRIDGE PLACE
124
ALTAMONTE SPRINGS, FL 32714 US

Name and Address of New Registered Agent:

NGUYEN, YEN K
393 WINCHESTER CT
LONGWOOD, FL 32779 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: _____

Electronic Signature of Registered Agent

02/02/2012

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 Statutes.

SIGNATURE: YEN NGUYEN, D.C. _____

DR

02/02/2012

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