2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 12, 2010
Secretary of State

DOCUMENT# L08000051433

Entity Name: BEST HEALTHCARE OF COLLIER, PLLC

Current Principal Place of Business:

3594 BROADWAY
SUITE #E
FT MYERS, FL 33901

New Principal Place of Business:

3594 BROADWAY
SUITE #A
FT MYERS, FL 33901

Current Mailing Address:

3594 BROADWAY
SUITE #E
FT MYERS, FL 33901

New Mailing Address:

3594 BROADWAY
SUITE #A
FT MYERS, FL 33901

FEI Number: 26-2666492 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

ROCK & ROLL CHIROPRACTIC, PLLC
6823 TAFT STREET
HOLLYWOOD, FL 33024 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: MGRM
Name: ROCK & ROLL CHIROPRACTIC, PLLC
Address: 6823 TAFT STREET
City-St-Zip: HOLLYWOOD, FL 33024

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: DR. MITCHELL G. JOMSKY MGRM 05/12/2010

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