

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000090611

Entity Name: VILFORT CHIROPRACTIC,LLC

FILED
Jan 10, 2011
Secretary of State

Current Principal Place of Business:

10618 RIVERVIEW DR
RIVERVIEW, FL 33578

New Principal Place of Business:

Current Mailing Address:

PO BOX 46036
TAMPA, FL 33646

New Mailing Address:

10618 RIVERVIEW DR.
RIVERVIEW, FL 33578

FEI Number: 26-3086053

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILFORT, CARLINE M DC
18101 BRIDLE BIT LN
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

VILFORT, CARLINE M DC
10618 RIVERVIEW DR.
RIVERVIEW, FL 33578 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: CARLINE VILFORT

01/10/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGM
Name: VILFORT, CARLINE M DC
Address: 18101 BRIDLE BIT LN
City-St-Zip: TAMPA, FL 33647

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: CARLINE VILFORT

DC

01/10/2011

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