

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000070707

FILED
Jan 06, 2010
Secretary of State

Entity Name: JACKSONVILLE CHIROPRACTIC & ACUPUNCTURE LLC

Current Principal Place of Business:

7860 GATE PARKWAY #106
JACKSONVILLE, FL 32256

New Principal Place of Business:

Current Mailing Address:

7860 GATE PARKWAY #106
JACKSONVILLE, FL 32256

New Mailing Address:

FEI Number: 27-0623164

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARLSON, JEREMIAH W DR.
11120 TIVERTON CT.
JACKSONVILLE, FL 32246 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: MGR
Name: CARLSON, JEREMIAH W DR.
Address: 11120 TIVERTON CT.
City-St-Zip: JACKSONVILLE, FL 32246

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: JEREMIAH W. CARLSON

DR.

01/06/2010

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