

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000024660

FILED
Jan 24, 2011
Secretary of State

Entity Name: LIFESTRENGTH FAMILY CHIROPRACTIC, PLLC

Current Principal Place of Business:

1250 WILDWOOD LAKES BLVD
108
NAPLES, FL 34104 US

New Principal Place of Business:

4280 TAMIAMI TRAIL EAST
102
NAPLES, FL 34112 US

Current Mailing Address:

1250 WILDWOOD LAKES BLVD
108
NAPLES, FL 34104 US

New Mailing Address:

4280 TAMIAMI TRAIL EAST
102
NAPLES, FL 34112 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COPELAND, CADE M
1250 WILDWOOD LAKES BLVD
108
NAPLES, FL 34104 US

Name and Address of New Registered Agent:

COPELAND, CADE M
4280 TAMIAMI TRAIL EAST
102
NAPLES, FL 34112 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:

01/24/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: COPELAND, CADE M
Address: 4280 TAMIAMI TRAIL EAST SUITE 102
City-St-Zip: NAPLES, FL 34112 US

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: CADE MICHAEL COPELAND

MGRM

01/24/2011

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