

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000030948

FILED
Jan 10, 2012
Secretary of State

Entity Name: COMPLETE CHIROPRACTIC HEALTHCARE, LLC

Current Principal Place of Business:

104 E. FLETCHER AVE., STE B
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

104 E. FLETCHER AVE., STE B
TAMPA, FL 33612

New Mailing Address:

218 E. BEARSS AVE.
#304
TAMPA, FL 33613

FEI Number: 27-2156914

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EPPS, MYLISA DR
218 EAST BEARSS AVENUE, #304
TAMPA, FL 33613 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: DR. MYLISA L. EPPS, LLC
Address: 218 EAST BEARSS AVENUE, #304
City-St-Zip: TAMPA, FL 33613

Title: MGRM
Name: EPPS, MYLISA
Address: 218 E. BEARSS AVE., #304
City-St-Zip: TAMPA, FL 33613

Title: MGRM
Name: PRIETO, JERRY SR
Address: 218 E. BEARSS AVE., #304
City-St-Zip: TAMPA, FL 33613

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: DR. MYLISA EPPS

MGRM

01/10/2012

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