

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000086454

FILED
Feb 29, 2012
Secretary of State

Entity Name: ALIGN CHIROPRACTIC AND WELLNESS CENTER, L.L.C.

Current Principal Place of Business:

1611 10TH AVENUE WEST
PALMETTO, FL 34221

New Principal Place of Business:

1611 10TH AVENUE WEST
PALMETTO, FL 34221 US

Current Mailing Address:

1611 10TH AVENUE WEST
PALMETTO, FL 34221

New Mailing Address:

1611 10TH AVENUE WEST
PALMETTO, FL 34221 US

FEI Number: 27-3273924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHIVER, JOSEPH C
1611 10TH AVENUE WEST
PALMETTO, FL 34221 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: SHIVER, JOSEPH C
Address: 1611 10TH AVENUE WEST
City-St-Zip: PALMETTO, FL 34221

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: JOSEPH C SHIVER DC

MGRM

02/29/2012

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