

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000062294

**FILED
Feb 02, 2012
Secretary of State**

Entity Name: INDIAN RIVER CHIROPRACTIC, PLLC

Current Principal Place of Business:

1547 US HIGHWAY 1
VERO BEACH, FL 32960 US

New Principal Place of Business:

Current Mailing Address:

1547 US HIGHWAY 1
VERO BEACH, FL 32960 US

New Mailing Address:

FEI Number: 45-2362488 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
SUITE A
TAMPA, FL 33612 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: DR
Name: SCHIERMYER, MATTHEW J
Address: 1547 US HIGHWAY 1
City-St-Zip: VERO BEACH, FL 32960 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: MATTHEW J. SCHIERMYER DR 02/02/2012

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