

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000064258

FILED
Apr 21, 2012
Secretary of State

Entity Name: CENTRAL FLORIDA INTEGRATED WELLNESS CLINIC, PLLC

Current Principal Place of Business:

500 E. HORATIO AVENUE
SUITE 5
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

500 E. HORATIO AVENUE
SUITE 5
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 45-2446411

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOLICK, CHANNING C
500 E. HORATIO AVE
SUITE 5
MAITLAND, FL 32751 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: BOLICK, CHANNING C
Address: 500 E. HORATIO AVE, SUITE 5
City-St-Zip: MAITLAND, FL 32751 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: CHANNING C. BOLICK

MGR

04/21/2012

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