

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000088495

FILED
Mar 06, 2012
Secretary of State

Entity Name: BEACH BOULEVARD CHIROPRACTIC LLC

Current Principal Place of Business:

11925 BEACH BOULEVARD
JACKSONVILLE, FL 32246

New Principal Place of Business:

11915 BEACH BOULEVARD
UNIT #105
JACKSONVILLE, FL 32246

Current Mailing Address:

1830 RADIUS DRIVE
420
HOLLYWOOD, FL 33020

New Mailing Address:

FEI Number: 45-3353228 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WINKLER, BRIAN D DR.
1830 RADIUS DRIVE
420
HOLLYWOOD, FL 33020 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: WINKLER, BRIAN D DR.
Address: 1830 RADIUS DRIVE #420
City-St-Zip: HOLLYWOOD, FL 33020

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: BRIAN WINKLER MGRM 03/06/2012

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