

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000119086

FILED
Apr 28, 2012
Secretary of State

Entity Name: MODERN HEALTH CHIROPRACTIC LLC

Current Principal Place of Business:

760 S VOLUSIA AVE. #100
ORANGE CITY, FL 32763

New Principal Place of Business:

760 S. VOLUSIA AVE.
100
ORANGE CITY, FL 32763

Current Mailing Address:

760 S VOLUSIA AVE. #100
ORANGE CITY, FL 32763

New Mailing Address:

760 S. VOLUSIA AVE.
100
ORANGE CITY, FL 32763

FEI Number: 45-3625092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOJCIK, CHRIS
760 S VOLUSIA AVE. #100
ORANGE CITY, FL 32763 US

Name and Address of New Registered Agent:

WOJCIK, CHRIS
760 S. VOLUSIA AVE.
100
ORANGE CITY, FL 32763 US

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

04/28/2012

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: WOJCIK, DR. CHRIS D.C.
Address: 760 S VOLUSIA AVE. #100
City-St-Zip: ORANGE CITY, FL 32763

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. CHRIS WOJCIK D.C.

MGR

04/28/2012

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