

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000130989

FILED
Apr 21, 2012
Secretary of State

Entity Name: BAYOU CHIROPRACTIC CENTER, P.L.

Current Principal Place of Business:

4761-6 BAYOU BLVD.
PENSACOLA, FL, 32503

New Principal Place of Business:

4761-6 BAYOU BLVD.
PENSACOLA, FL 32503

Current Mailing Address:

4761-6 BAYOU BLVD.
PENSACOLA, FL, 32503

New Mailing Address:

4761-6 BAYOU BLVD.
PENSACOLA, FL 32503

FEI Number: 99-0371060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HINO, ROXANNE ESQ..
1420 SE 47TH STREET
CAPE CORAL, FL 33904 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: DR., MONICA HILLS,
Address: 4761-6 BAYOU BLVD.
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM
Name: PAUL HILLS,
Address: 4761-6 BAYOU BLVD,
City-St-Zip: PENSACOLA, FL 32503

Title: MGRM
Name: STEVEN, MILLS
Address: 2465 OLD BROMPTON WAY
City-St-Zip: OAKVILLE, ONTARIO, CANADA, ON L6M0J5

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: MONICA HILLS

MGRM

04/21/2012

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