

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000001445

FILED
Feb 28, 2011
Secretary of State

Entity Name: RIBLEY CHIROPRACTIC FAMILY CENTER LLC

Current Principal Place of Business:

8525 W. HILLSBOROUGH AVE
TAMPA, FL 33615

New Principal Place of Business:

8523 BUCCANEER SQUARE
TAMPA, FL 33615

Current Mailing Address:

8525 W. HILLSBOROUGH AVE
TAMPA, FL 33615

New Mailing Address:

8523 BUCCANEER SQUARE
TAMPA, FL 33615

FEI Number: 59-3536979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

RIBLEY, PATRICIA C
8525 W. HILLSBOROUGH AVE.
TAMPA, FL 33615 US

Name and Address of New Registered Agent:

RIBLEY, PATRICIA C MRS
8523 BUCCANEER SQUARE
TAMPA, FL 33615 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: PATRICIA RIBEY

02/28/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RIBLEY, LAWRENCE E
Address: 8523 BUCCANEER SQUARE
City-St-Zip: TAMPA, FL 33615

Title: MGRM
Name: RIBLEY, PATRICIA C
Address: 8523 BUCCANEER SQUARE
City-St-Zip: TAMPA, FL 33615

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: PATRICIA RIBLEY

MGR

02/28/2011

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