

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000057082

**Entity Name:** JOSEPH E. MORRIS, DC, LLC

**Current Principal Place of Business:**

1080 US HWY 331 S  
SUITE B  
DEFUNIAK SPRINGS, FL 32435

**Current Mailing Address:**

PO BOX 1130  
DEFUNIAK SPRINGS, FL 32435

**FEI Number:** 45-2308404

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MORRIS, JOSEPH E DR.  
1080 US HWY 331 S  
SUITE B  
DEFUNIAK SPRINGS, FL 32435 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:** DR. JOSEPH E. MORRIS

04/03/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MORRIS, JOSEPH E DR.  
Address 1080 US HWY 331 S, STE B  
City-State-Zip: DEFUNIAK SPRINGS FL 32435

Title OFFICE MANAGER  
Name MORRIS, KELLY D  
Address 1080 US HWY 331 S  
SUITE B  
City-State-Zip: DEFUNIAK SPRINGS FL 32435

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JOSEPH MORRIS

OWNER

04/03/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date