

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000166473

**Entity Name:** CHIRO AT LAKE WORTH, LLC

**Current Principal Place of Business:**

2328 10TH AVENUE, SUITE 300-301  
LAKE WORTH, FL 33461

**Current Mailing Address:**

2328 10TH AVENUE, SUITE 300-301  
LAKE WORTH, FL 33461

**FEI Number:** 46-4878459

**Certificate of Status Desired:** No

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

WHITE, II, JOHN ESQ.  
NASON, YEAGER, GERSON, WHITE & LIOCE P.A.  
1645 PALM BEACH LAKES BLVD, SUITE 120  
WEST PALM BEACH, FL 33401 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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MEMBER  
Name CHIRO OWNER, LLC  
Address 2328 10TH AVENUE, SUITE 300-301  
City-State-Zip: LAKE WORTH FL 33461

*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:** CHIRO OWNER, LLC

M

04/27/2015

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date