

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000081083

Entity Name: MABRY CHIROPRACTIC, LLC

Current Principal Place of Business:

11211 PROSPERITY FARMS RD.
SUITE D 223
PALM BEACH GARDENS, FL 33410

Current Mailing Address:

11211 PROSPERITY FARMS RD.
SUITE D 223
PALM BEACH GARDENS, FL 33410

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 AMBR
Name MABRY, LYNN K
Address 11211 PROSPERITY FARMS RD.
 SUITE D 223
City-State-Zip: PALM BEACH GARDENS FL 33410

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: LYNN K. MABRY

MEMBER

04/17/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date