

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000106711

Entity Name: VERACITY CHIROPRACTIC LLC

Current Principal Place of Business:

1850 RYE ROAD
BRADENTON, FL 34212

Current Mailing Address:

14041 NIGHTHAWK TERRACE
BRADENTON, FL 34202 US

FEI Number: 47-4390850

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WENGERT, ANDREW J
14041 NIGHTHAWK TERRACE
BRADENTON, FL 34202 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 MGR
Name WENGERT, ANDREW J
Address 14041 NIGHTHAWK TERRACE
City-State-Zip: BRADENTON FL 34202

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: ANDREW WENGERT

MANAGER

02/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date