

C#2926428

STATE OF FLORIDA
DEPARTMENT OF HEALTH
DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
02/26/2008	CH 7386	24410

The **CHIROPRACTIC PHYSICIAN**
 named below has met all requirements of
 the laws and rules of the state of Florida.
 Expiration Date: **MARCH 31, 2010**
GARRETT SLADE BODE
 ATTN: BODE SPINAL CENTER
 209 EAST BUSCH BLVD
 TAMPA, FL 33617

2926428

AC#

STATE OF FLORIDA
 DEPARTMENT OF HEALTH
 DIVISION OF MEDICAL QUALITY ASSURANCE

DATE	LICENSE NO.	CONTROL NO.
02/26/2008	CH 7386	24410

The **CHIROPRACTIC PHYSICIAN**
 named below has met all requirements of
 the laws and rules of the state of Florida.
 Expiration Date: **MARCH 31, 2010**

GARRETT SLADE BODE


 Charlie Crist
 GOVERNOR


 Ana M. Viamonte Ros, M.D., M.P.H.
 STATE SURGEON GENERAL

DISPLAY IF REQUIRED BY LAW