

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000082123

FILED  
Feb 22, 2011  
Secretary of State

**Entity Name:** SERENE DENTAL CENTER LLC

**Current Principal Place of Business:**

2411 10TH AVE N  
LAKE WORTH, FL 33461

**New Principal Place of Business:**

**Current Mailing Address:**

2411 10TH AVE N  
LAKE WORTH, FL 33461

**New Mailing Address:**

FEI Number: 26-0687165      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ANDERSON, MARC DDS  
701 CYPRESS GREEN CIR  
WELLINGTON, FL 33414    US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ANDERSON, MARC  
Address: 701 CYPRESS GREEN CIR  
City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MARC ANDERSON      MGR      02/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date