2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 11, 2008
Secretary of State

DOCUMENT# L07000118707

Entity Name: DENTAL PRACTICE SOLUTIONS,LLC

Current Principal Place of Business:

3013 CLARK ROAD
10
SARASOTA, FL 34231

New Principal Place of Business:

Current Mailing Address:

5020 CLARK ROAD
425
SARASOTA, FL 34233

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

GIANNINI, MARIA PIA
3013 CLARK ROAD
10
SARASOTA, FL 34231 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 ( ) Delete
Name: GIANNINI, MARIA PIA
Address: 3013 CLARK ROAD #10
City-St-Zip: SARASOTA, FL 34231 US

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: MARIA PIA GIANNINI MGR 02/11/2008

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