

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED
Feb 17, 2011
Secretary of State**

DOCUMENT# L10000110200

Entity Name: EDGEWATER ENDODONTICS, LLC

Current Principal Place of Business:

5305 SPRING HILL DRIVE
SPRING HILL, FL 34606 US

New Principal Place of Business:

Current Mailing Address:

5305 SPRING HILL DRIVE
SPRING HILL, FL 34606 US

New Mailing Address:

FEI Number: 27-3756485 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BAUR, SCOTT
5305 SPRING HILL DRIVE
SPRING HILL, FL 34606 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: MGRM
Name: BAUR, SCOTT
Address: 5305 SPRING HILL DRIVE
City-St-Zip: SPRING HILL, FL 34606 US

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: SCOTT T BAUR DR. 02/17/2011

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