# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L06000039614

## Entity Name: BRIGHT SMILES FAMILY AND COSMETIC DENTISTRY PLLC

### **Current Principal Place of Business:**

208 HOSPITAL DRIVE FORT WALTON BEACH, FL 32548

## **Current Mailing Address:**

208 HOSPITAL DRIVE FORT WALTON BEACH, FL 32548 US

# FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

BARTLETT, KATHERINE J 208 HOSPITAL DRIVE FORT WALTON BEACH, FL 32548 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

### Authorized Person(s) Detail :

 
 Title
 MGRM

 Name
 BARTLETT FAMILY AND COSMETIC DENTISTRY, P.L.L.C.

 Address
 208 HOSPITAL DRIVE

City-State-Zip: FORT WALTON BEACH FL 32548

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.

ADMINISTRATOR

#### SIGNATURE: ERIC BARTLETT

Electronic Signature of Signing Authorized Person(s) Detail

FILED Apr 16, 2014 Secretary of State CC8912499031

Certificate of Status Desired: Yes

Date

04/16/2014 Date