

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000016373

Entity Name: ANDREW J. HOLLOMAN, DDS & ASSOCIATES, P.L.

Current Principal Place of Business:

2127 NE COACHMAN RD
CLEARWATER, FL 33765

Current Mailing Address:

2127 NE COACHMAN RD
CLEARWATER, FL 33765 US

FEI Number: 27-1891004

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HOLLOMAN, ANDREW JDDS
2521 W. JETTON AVE
TAMPA, FL 33629 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

_____ Date

Authorized Person(s) Detail :

Title MGR
Name HOLLOMAN, ANDREW JDDS
Address 2521 W. JETTON AVE
City-State-Zip: TAMPA FL 33629

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.

SIGNATURE: ANDREW J HOLLOMAN

MEMBER

01/16/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date