

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000049267

Entity Name: DENTAL PRACTICE GROUP OF FLORIDA, PLLC

Current Principal Place of Business:

7341 OFFICE PARK PLACE STE 101
MELBOURNE, FL 32940

Current Mailing Address:

7341 OFFICE PARK PLACE STE 101
MELBOURNE, FL 32940 US

FEI Number: 27-2528796

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 MGRM
Name CHRISTIE, TODD E
Address 8586 EDEN ISLES LN
City-State-Zip: MERRITT ISLAND FL 32952

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: TODD E CHRISTIE

MGRM

03/31/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date