

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000061338

**Entity Name:** GENTLE DENTAL GROUP OF DEERFIELD BEACH, PLLC

**Current Principal Place of Business:**

2265C W. HILLSBORO BLVD  
DEERFIELD BEACH, FL 33442

**Current Mailing Address:**

951 BROKEN SOUND PKWY NW STE. 185  
BOCA RATON, FL 33487

**FEI Number: 27-2808186**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

ZIEGLER, NEAL B  
951 BROKEN SOUND PKWY NW STE. 185  
BOCA RATON, FL 33487 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: NEAL B. ZIEGLER**

**04/30/2013**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title CDO  
Name ZIEGLER, NEAL DDS  
Address 951 BROKEN SOUND PKWY NW STE.  
185  
City-State-Zip: BOCA RATON FL 33487

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: NEAL B. ZIEGLER**

**CDO**

**04/30/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date