## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000141254

Entity Name: TARPON SHORES DENTAL, LLC

**Current Principal Place of Business:** 

1314 EAST VENICE AVENUE

SUITE F

VENICE, FL 34285

**Current Mailing Address:** 

1314 EAST VENICE AVENUE

SUITE F

VENICE, FL 34285 US

FEI Number: 46-1373259 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHESTNUT BUSINESS SERVICES, LLC 333 3RD AVENUE NORTH SUITE 200 ST PETERSBURG, FL 33701 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: MICHAEL D. MAGIDSON, ESQ. 02/11/2019

**Electronic Signature of Registered Agent** 

Date

FILED Feb 11, 2019

**Secretary of State** 

9365607975CC

Authorized Person(s) Detail:

Title MGR Title MGR

Name WEERASOORIYA, C. ROMESH DMD Name THOMPSON, R. SCOTT DDS

Address 1314 EAST VENICE AVENUE, SUITE F Address 1314 EAST VENICE AVENUE, SUITE F

City-State-Zip: VENICE FL 34285 City-State-Zip: VENICE FL 34285

Title MGR

Name WEERASOORIYA, SHANAKA LDMD
Address 1314 EAST VENICE AVENUE, SUITE F

City-State-Zip: VENICE FL 34285

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: WEERASOORIYA, C. ROMESH DMD

**MANAGER** 

02/11/2019