

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000022272

Entity Name: SEAN CARR DDS, PLLC

Current Principal Place of Business:

90 CYPRESS WAY E.
SUITE 20
NAPLES, FL 34110

Current Mailing Address:

90 CYPRESS WAY E.
SUITE 20
NAPLES, FL 34110

FEI Number: 46-1990789

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAROL L LEBEAU, PA
4953 CASTELLO DRIVE
SUITE 200
NAPLES, FL 34103 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 CARR, SEAN
Address 605 95TH AVE N
City-State-Zip: NAPLES FL 34108

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: SEAN CARR

MANAGING MEMBER

01/07/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date