

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000062386

Entity Name: AMERICAN DENTAL OF FLORIDA-FORT LAUDERDALE, LLC

Current Principal Place of Business:

2740 E. COMMERCIAL BLVD
FT LAUDERDALE, FL 33308

Current Mailing Address:

4801 S UNIVERSITY DRIVE
STE 212
DAVIE, FL 33328 US

FEI Number: 46-2649029

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KERNS, JAMES M
4801 S UNIVERSITY DRIVE
STE 212
DAVIE, FL 33328 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 KERNS, JAMES M
Address 6905 W BROWARD BLVD SUITE 101
STE. 101
City-State-Zip: PLANTATION FL 33317

Title MGRM
Name FENTON, DANIEL M
Address 1272 N RIO VISTA BLVD
City-State-Zip: FT LAUDERDALE FL 33316

Title MANAGER
Name VERA, NATHALIE DR
Address 2740 E. COMMERCIAL BLVD
City-State-Zip: FT LAUDERDALE FL 33308

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: JAMES KERNS

PRES

01/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date