2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000120379

Entity Name: DENTAL PARTNERS OF VERO BEACH, PLLC

Current Principal Place of Business:

3755 7TH TERRACE, SUITE 303 VERO BEACH. FL 32960

Current Mailing Address:

3755 7TH TERRACE, SUITE 303 VERO BEACH, FL 32960

FEI Number: 47-1956856 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KATZ SCHWIBNER, JENNA 3755 7TH TERRACE, SUITE 303 VERO BEACH, FL 32960 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: JENNA KATZ SCHWIBNER, DMD 02/18/2019

Electronic Signature of Registered Agent

Date

FILED Feb 18, 2019

Secretary of State

9223914514CC

Authorized Person(s) Detail:

 Title
 MGR
 Title
 OFFICE MANAGER

 Name
 JENNA KATZ SCHWIBNER, D.M.D.,
 Name
 MASONET, SHIRLEY

PLLC

Address 3755 7TH TERRACE, SUITE 303

City-State-Zip: VERO BEACH FL 32960

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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: JENNA KATZ SCHWIBNER

MANAGER

02/18/2019 Date