# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### DOCUMENT# L17000155343

#### Entity Name: SHORE 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: NOT APPLICABLE

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

CHESTNUT BUSINESS SERVICES, LLC 333 3RD AVENUE NORTH, SUITE 200 ST. PETERSBURG, FL 33701 US Certificate of Status Desired: No

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:

Authorized Person(s) Detail :			
Title	MGR	Title	MGR
Name	WEERASOORIYA, SHANAKA L DMD	Name	WEERASOORIYA, C. ROMESH DMD
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	THOMPSON, R. SCOTT DDS		
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

Date

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 12, 2019 Secretary of State 0781213144CC