

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000004983

**Entity Name:** GENESIS DENTAL MANAGEMENT, LLC

**Current Principal Place of Business:**

3150 ZELDA COURT  
MONTGOMERY, AL 36106

**Current Mailing Address:**

3150 ZELDA COURT  
MONTGOMERY, AL 36106 US

**FEI Number: 81-2982797**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WATERS, FORREST DR.  
2620 JENKS AVE.  
PANAMA CITY, FL 32401 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: FORREST WATERS, DMD**

**04/30/2021**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AUTHORIZED REPRESENTATIVE  
Name WATERS, FORREST DR.  
Address 3150 ZELDA COURT  
City-State-Zip: MONTGOMERY AL 36106

*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: FORREST WATERS**

**REPRESENTATIVE**

**04/30/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date