

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000001744

FILED
Feb 09, 2009
Secretary of State

Entity Name: J. HUNTER COLLINS, D.M.D., P.L.

Current Principal Place of Business:

202 LANTERNBACK ISLAND DR.
SATELLITE BEACH, FL 32937

New Principal Place of Business:

524 OCEAN AVE
MELBOURNE BEACH, FL 32951

Current Mailing Address:

202 LANTERNBACK ISLAND DR.
SATELLITE BEACH, FL 32937

New Mailing Address:

524 OCEAN AVE
MELBOURNE BEACH, FL 32951

FEI Number: 65-0983263

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FRESE, GARY B
930 S HARBOR CITY BLVD
SUITE 505
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: COLLINS, J. HUNTER
Address: 202 LANTERNBACK ISLAND DR.
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: COLLINS, J. HUNTER
Address: 524 OCEAN AVENUE
City-St-Zip: MELBOURNE BEACH, FL 32951

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: J HUNTER COLLINS

MGRM

02/09/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date