

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000009180

FILED
Jan 18, 2007
Secretary of State

Entity Name: ARNOLD PEDIATRIC DENTISTRY ASSOCIATES, L.C.

Current Principal Place of Business:

4800 NE 20 TERRACE, #205
FORT LAUDERDALE, FL 33308

New Principal Place of Business:

4800 NE 20 TERRACE,
SUITE 205
FORT LAUDERDALE, FL 33308

Current Mailing Address:

4800 NE 20 TERRACE, #205
FORT LAUDERDALE, FL 33308

New Mailing Address:

FEI Number: 65-1030631 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DOBBINS, B. ALAN III
2601 E. OAKLAND PARK BLVD., #400
FORT LAUDERDALE, FL 33306 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: ARNOLD, PATRICK B DMD
Address: 4800 NE 20 TERRACE, #205
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICK B ARNOLD

MGRM

01/18/2007

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