

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jul 05, 2007 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L00000013711</b>	
1. Entity Name DAVID I. ZELIN, D.M.D., L.L.C.	
Principal Place of Business 4951 B EAST ADAMO DRIVE, SUITE 222 STE 222 TAMPA, FL 33605	Mailing Address 4951 B EAST ADAMO DRIVE, SUITE 222 STE 222 TAMPA, FL 33605



02202007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3682988	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  ZELIN, DAVID I D.M.D. 4951 B EAST ADAMO DRIVE, SUITE 222 TAMPA, FL 33605
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**Filing Fee is \$50.00  
Due by May 1, 2007**

*\* See enclosed letter \**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR ZELIN, DAVID I D.M.D. 4951 B EAST ADAMO DRIVE, SUITE 222 TAMPA, FL 33605
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07/06/07-80004-010 50.00

**DO NOT WRITE  
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:** *David I. Zelin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

*DAVID I. ZELIN*

*6/29/07 (813) 247-6119*

Date

Daytime Phone #