

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000000879

FILED
Jan 26, 2009
Secretary of State

Entity Name: CHARLES A. PETER, D.M.D., P.L.

Current Principal Place of Business:

29605 U.S. HIGHWAY 19 NORTH, SUITE 310
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

29605 U.S. HIGHWAY 19 NORTH, SUITE 310
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 59-2567769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETER, CHARLES A
29605 U.S. HIGHWAY 19 NORTH, SUITE 310
CLEARWATER, FL 33761 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: PETER, CHARLES A
Address: 29605 U.S. HIGHWAY 19 NORTH, SUITE 310
City-St-Zip: CLEARWATER, FL 33761

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 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: CHARLES A. PETER

MGRM

01/26/2009

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