

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000017196

FILED
Jul 12, 2007
Secretary of State

Entity Name: EXPRESS DENTAL CARE, LLC

Current Principal Place of Business:

5100 W. LEMON ST
STE 109
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

5100 W. LEMON ST
STE 109
TAMPA, FL 33609

New Mailing Address:

FEI Number: 30-0095279 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WHIDDEN, STACEY
5100 W. LEMON ST
STE 109
TAMPA, FL 33609 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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WHIDDEN, STACEY L
Address: 5100 W. LEMON ST, STE 109
City-St-Zip: TAMPA, FL 33609

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: STACEY L. WHIDDEN

MGRM

07/12/2007

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