

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000009210

FILED
Apr 27, 2012
Secretary of State

Entity Name: DENTAL CARE AT DR. PHILLIPS, L.L.C.

Current Principal Place of Business:

215 IMPERIAL BLVD
#C2
LAKELAND, FL 33803

New Principal Place of Business:

Current Mailing Address:

7069 PHILLIPS COVE CT
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 14-1876258 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BHANJI, RAHIM
7069 PHILLIPS COVE CT
ORLANDO, FL 32819 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
Name: BHANJI, RAHIM
Address: 215 IMPERIAL BLVD #C2
City-St-Zip: LAKELAND, FL 33803

I hereby 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: RAHIM BHANJI

MGR

04/27/2012

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