

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000048437

Entity Name: M. SCHUMACHER, D.M.D., LLC

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

685 ROYAL PALM BEACH BLVD.  
#204  
ROYAL PALM BEACH, FL 33411 US

**New Principal Place of Business:**

**Current Mailing Address:**

685 ROYAL PALM BEACH BLVD.  
#204  
ROYAL PALM BEACH, FL 33411 US

**New Mailing Address:**

FEI Number: 20-1441420      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MIMI STEIN, P.A.  
1764 NORTH CONGRESS  
#200  
WEST PALM BEACH, FL US 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: MGR  
Name: SCHUMACHER, MARK H JR.  
Address: 685 ROYAL PALM BEACH BLVD. #204  
City-St-Zip: ROYAL PALM BEACH, FL 33411 US

Title: MGRM  
Name: SCHUMACHER, EUGENIA  
Address: 685 ROYAL PALM BEACH BLVD. #204  
City-St-Zip: ROYAL PALM BEACH, FL US

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: MARK SCHUMACHER

MGR

04/12/2010

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