

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000065188

FILED
Apr 18, 2012
Secretary of State

Entity Name: ORAL APPLIANCE THERAPY, L.L.C.

Current Principal Place of Business:

901 NORTHPOINT PARKWAY
SUITE 405A
WEST PALM BEACH, FL 33407

New Principal Place of Business:

Current Mailing Address:

901 NORTHPOINT PARKWAY
SUITE 405A
WEST PALM BEACH, FL 33407

New Mailing Address:

FEI Number: 20-1774897

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PHILLIPS, DOUGLAS
901 NORTHPOINT PARKWAY
SUITE 405A
WEST PALM BEACH, FL 33407 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: PHILLIPS, DOUGLAS J JR
Address: 901 NORTHPOINT PARKWAY
City-St-Zip: WEST PALM BEACH, FL 33407

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: DOUGLAS J PHILLIPS, JR

MGRM

04/18/2012

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