

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000065617

**FILED**  
**Mar 14, 2012**  
**Secretary of State**

**Entity Name:** EASLER COSMETIC DENTISTRY, LLC

**Current Principal Place of Business:**

7211 N DALE MABRY HWY  
SUITE # 100  
TAMPA, FL 33614

**New Principal Place of Business:**

7211 N DALE MABRY HWY SUITE # 100  
TAMPA, FL 33614

**Current Mailing Address:**

7211 N DALE MABRY HWY  
SUITE # 100  
TAMPA, FL 33614

**New Mailing Address:**

7100 BEACHY PLAZA #1  
ST PETE BEACH, FL 33706 US

**FEI Number:** 20-1576033

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JOSEPH, LABRUZZO  
7104 COVE PLACE  
TAMPA, FL 33617 US

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

EASLER, LAWRENCE G  
7100 BEACHY PLAZA #1  
ST. PETE BEACH, FL 33706 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: LAWRENCE G. EASLER

03/14/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: EASLER, LAWRENCE G  
Address: 7100 BEACHY PLAZA #1  
City-St-Zip: ST PETE BEACH, FL 33706

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: LAWRENCE G. EASLER

MGRM

03/14/2012

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