2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 26, 2007 08:00 AM Secretary of State

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1. Entity Name

LEE'S DENTAL TECHNOLOGY, LLC



Principal Place of Business

Mailing Address

2090 SOUTH NOVA ROAD SOUTH DAYTONA, FL 32119 39 E. BAYSHORE DR. PORT ORANGE, FL 32127

US



DO NOT WRITE IN THIS SPACE

02092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 32-0135180 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

GAVITT, TERESA 39 E. BAYSHORE DRIVE PORT ORANGE, FL 32127

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8.	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.	I am familiar with,	and accept
	the obligations of registered agent.		

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

Filing Fee Is \$50.00 Due by May 1, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGRM
NAME	GAVITT, TERESA
STREET ADDRESS	39 E. BAYSHORE DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32127
TITLE	MGRM
NAME	GAVITT, LEE
STREET ADDRESS	39 E. BAYSHORE DRIVE
CITY-ST-ZIP	PORT ORANGE, FL 32127
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
11. I hereby	certify that the information supplied with this filing does not qualify for the e

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I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

386-299-7434

Daytime Phone #