2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000092731

SEBASTIAN, FL 32958 US

City-St-Zip:

Entity Name: DR. BROOKS & DR. PIRKLE, DDS, LLC

FILED Jun 30, 2005 Secretary of State

Current P	Principal Place of Business:	New Principal Pl	New Principal Place of Business:	
701 SEBA SUITE B	STIAN BLVD.			
	AN, FL 32958			
Current N	failing Address:	New Mailing Add	New Mailing Address:	
	STIAN BLVD.			
SUITE B SEBASTIA	AN, FL 32958			
	r: 20-2047581 FEI Number Applied For () nce with s. 607.193(2)(b), F.S., the limited liability	FEI Number Not Applicable (
	d Address of Current Registered Agent:	• •	ss of New Registered Agent:	
	HAROLD L JR.			
	STIAN BLVD.			
SUITE B	AN, FL 32958 US			
OLDAGIIA	AN, I E 32336 00			
	e named entity submits this statement for the of Florida.	ne purpose of changing its regis	tered office or registered agent, or both	
SIGNATU	RE:			
	Electronic Signature of Registered	Agent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGE	ADDITIONS/CHANGES:	
Title:	MGRM () Delete	Title:	() Change () Addition	
Name:	BROOKS, HAROLD L JR.	Name:		
Address:	701 SEBASTIAN BLVD. SUITE B	Address:		
City-St-Zip:	SEBASTIAN, FL 32958 US	City-St-Zip:		
Title:	MGRM () Delete	Title:	() Change () Addition	
Name:	PIRKLE, PATRICK W	Name:	()	
Address:	701 SEBASTIAN BLVD. SUITE B	Address:		

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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: PATRICK W PIRKLE MGMR 06/30/2005