2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 07, 2012
Secretary of State

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Entity Name: COASTAL ORTHODONTICS, PLLC

Current Principal Place of Business:

904 GARDEN GATE CIRCLE
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

904 GARDEN GATE CIRCLE
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 20-3669034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LITVAK, KRAMER A
226 EAST GOVERNMENT STREET
PENSACOLA, FL 32502 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: LITVAK, ALLEN JR.
Address: 4155 BAISDEN ROAD
City-St-Zip: PENSACOLA, FL 32503

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 Statues.

SIGNATURE: ALLEN LITVAK JR MGR 02/07/2012

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