2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 05, 2009
Secretary of State

DOCUMENT# L06000000573

Entity Name: H&L DENTAL, LLC.

Current Principal Place of Business:

3101 W MICHIGAN AVE.
STE. F.
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

3101 W MICHIGAN AVE.
STE. F
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 20-4025295 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LUNDAY, TERENCE D
3101 W MICHIGAN AVE.
STE. F
PENSACOLA, FL 32526 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 ( ) Delete
Name: HART, JAMES
Address: 3101 W MICHIGAN AVE. STE. F
City-St-Zip: PENSACOLA, FL 32526

Title: MGRM ( ) Delete
Name: LUNDAY, TERENCE
Address: 3101 W. MICHIGAN AVE. STE. F.
City-St-Zip: PENSACOLA, FL 32526

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: T LUNDAY M 02/05/2009

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