2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# L06000005937

Entity Name: WILLIAM GLOVER, III, DMD, LLC

Current Principal Place of Business:

1507 S. HIAWASSEE ROAD
SUITE 209 & 210
ORLANDO, FL 32835

New Principal Place of Business:

Current Mailing Address:

1507 S. HIAWASSEE RD.
SUITE 209
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 20-4164823 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GLOVER, WILLIAM A DR
2855 CARDESSI DR.
OCOEE, FL 34761 US

Name and Address of New Registered Agent:

GLOVER, WILLIAM DR
2855 CARDESSI DR.
OCOEE, FL 34761 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: WILLIAM GLOVER 111 01/07/2008
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: GLOVER, WILLIAM III
Address: 1507 S. HIAWASSEE RD.
City-St-Zip: ORLANDO, FL 32835

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: GLOVER, WILLIAM III
Address: 1507 S. HIAWASSEE RD.STE.-209
City-St-Zip: ORLANDO, FL 32835

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: WILLIAM GLOVER111 DR. 01/07/2008
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date