2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 12, 2007
Secretary of State

DOCUMENT# L06000006226

Entity Name: KIMBERLY D. THIEL, DDS, LLC

Current Principal Place of Business:

692 SHADOW BAY WAY
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

692 SHADOW BAY WAY
OSPREY, FL 34229

New Mailing Address:

2007 PARKHILL DR
ROSEVILLE, CA 95661

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THIEL, KIMBERLY D
692 SHADOW BAY WAY
OSPREY, FL 34229 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: THIEL, KIMBERLY D
Address: 692 SHADOW BAY WAY
City-St-Zip: OSPREY, FL 34229

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: THIEL, KIMBERLY D
Address: 2007 PARKHILL DR
City-St-Zip: ROSEVILLE, CA 95661

I hereby certify that the information supplied with this filing does not qualify for the 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: KIMBERLY D THIEL MGRM 02/12/2007

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