2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000007033

Entity Name: SPA DENTISTRY, L.L.C.

INSKO, SALLY W

4050 TAMPA ROAD

OLDSMAR, FL 34677

Name:

Address:

City-St-Zip:

FILED Jan 19, 2008 Secretary of State

New Principal Place of Business: Current Principal Place of Business: 4050 TAMPA ROAD OLDSMAR, FL 34677 **Current Mailing Address: New Mailing Address:** 4050 TAMPA ROAD OLDSMAR, FL 34677 FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: INSKO, SALLY W 4050 TAMPA ROAD OLDSMAR, FL 34677 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR () Delete 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: SALLY W INSKO MGR 01/19/2008