

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000042915

FILED
Feb 11, 2011
Secretary of State

Entity Name: NORTHWOOD DENTAL ASSOCIATES, PLLC

Current Principal Place of Business:

3023 EASTLAND BLVD., SUITE 112
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

3023 EASTLAND BLVD., SUITE 112
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 20-4761369

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTER, JITEN J DDS
3023 EASTLAND BLVD., SUITE 112
CLEARWATER, FL 33761 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: HAGAN, JILL D.M.D.
Address: 3023 EASTLAND BLVD., SUITE 112
City-St-Zip: CLEARWATER, FL 33761

Title: MGR
Name: MASTER, JITEN J D.D.S.
Address: 3023 EASTLAND BLVD., SUITE 112
City-St-Zip: CLEARWATER, FL 33761

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 Statutes.

SIGNATURE: JILL HAGAN

MGR

02/11/2011

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