2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2012
Secretary of State

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Entity Name: WINDERMERE CENTER FOR DENTISTRY, LLC

Current Principal Place of Business:

401 MAIN STREET
WINDERMERE, FL 34786

New Principal Place of Business:

Current Mailing Address:

8976 CONROY WINDERMERE ROAD
ORLANDO, FL 32835

New Mailing Address:

FEI Number: 20-5322727 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCKISSOCK, MATTHEW D DMD
8976 CONROY WINDERMERE RD
ORLANDO, FL 32835 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: THAKKAR, RUPAL P
Address: 8976 CONROY WINDERMERE ROAD
City-St-Zip: ORLANDO, FL 32835 US

Title: MGR
Name: MCKISSOCK, MATTHEW D
Address: 8976 CONROY WINDERMERE ROAD
City-St-Zip: ORLANDO, FL 32835 US

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 Statues.

SIGNATURE: MATTHEW D. MCKISSOCK DR. 03/05/2012

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