

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000105024

FILED
Apr 28, 2009
Secretary of State

Entity Name: DRS. LAVIOLA & LAVIOLA, PLLC

Current Principal Place of Business:

115 JFK DRIVE
B
ATLANTIS, FL 33462

New Principal Place of Business:

Current Mailing Address:

115 JFK DRIVE
B
ATLANTIS, FL 33462

New Mailing Address:

FEI Number: 20-5868169 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAVIDLA, JAMIE J DMD
115 JFK DRIVE
B
ATLANTIS, FL 33462 US

Name and Address of New Registered Agent:

LAVIOLA, JAMIE J DMD
115 JFK DRIVE
B
ATLANTIS, FL 33462 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: JAMIE J. LAVIOLA, DMD 04/28/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LAVIOLA, JOSEPH J DMD
Address: 115 JFK DRIVE SUITE B
City-St-Zip: ATLANTIS, FL 33462

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Delete
Name: LAVIOLA, JAMIE J DMD
Address: 115 JFK DRIVE SUITE B
City-St-Zip: ATLANTIS, FL 33462

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: JAMIE J. LAVIOLA DR. 04/28/2009

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