

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000119840

FILED
Jan 07, 2008
Secretary of State

Entity Name: ORANGE CITY DENTAL SPECIALISTS, LLC

Current Principal Place of Business:

322 E. CENTRAL BLVD., #711
ORLANDO, FL 32801

New Principal Place of Business:

150 E. ROBINSON ST.
2111
ORLANDO, FL 32801

Current Mailing Address:

322 E. CENTRAL BLVD., #711
ORLANDO, FL 32801

New Mailing Address:

150 E. ROBINSON ST.
2111
ORLANDO, FL 32801

FEI Number: 20-8102781

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILLER, SOUTH & MILHAUSEN, P.A.
C/O SCOTT R. ROST, ESQ.
1000 LEGION PLACE, SUITE 1200
ORLANDO, FL 32801 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 () Delete
Name: WENK, SCOTT
Address: 322 E. CENTRAL BLVD., #711
City-St-Zip: ORLANDO, FL 32801

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: WENK, SCOTT
Address: 150 E. ROBINSON ST., 2111
City-St-Zip: ORLANDO, FL 32801

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: SCOTT WENK

MGR

01/07/2008

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