

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121893

FILED
Aug 05, 2008
Secretary of State

Entity Name: MATTHEW J. HENRY, DDS, PL

Current Principal Place of Business:

9260 BAY HARBOR TERRACE #24
BAY HARBOR ISLANDS, FL 33154

New Principal Place of Business:

5070 N A1A SUITE E
VERO BEACH, FL 32963

Current Mailing Address:

9260 BAY HARBOR TERRACE #24
BAY HARBOR ISLANDS, FL 33154

New Mailing Address:

5070 N A1A SUITE E
VERO BEACH, FL 32963

FEI Number: 20-8109615 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GULECAS, JAMES F ESQ.
1968 BAYSHORE BLVD.
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

RAPPEL, ROBERT ESQ.
1515 INDIAN RIVER BLVD SUTE A210
VERO BEACH, FL 32960 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: ROBERT RAPPEL DO ESQ

08/05/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HENRY, MATTHEW J DDS
Address: 9260 BAY HARBOR TERRACE #24
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: HENRY, MATTHEW J DDS
Address: 774 S EASY ST
City-St-Zip: SEBASTIAN, FL 32958

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: MATTHEW J HENRY DDS

MGR

08/05/2008

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