

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2008 8:00 am
Secretary of State

03-19-2008 90148 003 ***138.75

DOCUMENT # L07000032482

1. Entity Name
GREGG G. HASSLER, JR., D.M.D., P.L.



Principal Place of Business
614 RAVENNA STREET
VENICE, FL 34285

Mailing Address
614 RAVENNA STREET
VENICE, FL 34285

2. Principal Place of Business - No P.O. Box #
232 MILAN AVENUE WEST

3. Mailing Address
232 MILAN AVENUE WEST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02172008 Chg-LLC CR2E083 (12/06)

City & State
VENICE, FL

City & State
VENICE, FL

4. FEI Number
20-8719597

Applied For
Not Applicable

Zip
34285

Country
USA

Zip
34285

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HASSLER, GREGG G JR DMD
614 RAVENNA STREET
VENICE, FL 34285

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Gregg G. Hassler Jr.

(NOTE: Registered Agent signature required when reinstating)

3/16/08

DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGR ☐ Delete
NAME HASSLER, GREGG G JR DMD
STREET ADDRESS 614 RAVENNA STREET
CITY-ST-ZIP VENICE, FL 34285

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 232 MILAN AVENUE WEST
CITY-ST-ZIP VENICE, FL 34285

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

Gregg G. Hassler Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

3/16/08

Date

(941) 486-8883

Daytime Phone #