2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 22, 2008
Secretary of State

DOCUMENT# L07000093272

Entity Name: ADAM J. BARR, D.D.S., LLC

Current Principal Place of Business:

565 ERROLL PKWY
APOPKA, FL 32712 US

New Principal Place of Business:

565 ERROL PKWY
APOPKA, FL 32712 US

Current Mailing Address:

565 ERROLL PKWY
APOPKA, FL 32712 US

New Mailing Address:

565 ERROL PKWY
APOPKA, FL 32712 US

FEI Number: 26-0899828 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
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:

CROUSE, RICHARD B
978 DOUGLAS AVE
SUITE 102
ALTAMONTE SPRINGS, FL 32714 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: MGRM ( ) Delete
Name: BARR, ADAM J
Address: 565 ERROLL PKWY
City-St-Zip: APOPKA, FL 32712 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: BARR, ADAM J
Address: 565 ERROL PKWY
City-St-Zip: APOPKA, FL 32712 US

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: ADAM BARR MGRM 07/22/2008

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