

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000124723

FILED
Apr 18, 2012
Secretary of State

Entity Name: COASTAL JAW SURGERY OF TRINITY, LLC

Current Principal Place of Business:

8845 HAWBUCK ST.
TRINITY, FL 34652

New Principal Place of Business:

Current Mailing Address:

2711 TAMPA ROAD
PALM HARBOR, FL 34684 US

New Mailing Address:

FEI Number: 37-1560011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRIS, MICHAEL E ESQ
29 N. PINELLAS AVENUE
TARPON SPRINGS, FL 34689 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: PRES
Name: PIKOS, MICHAEL A DDS
Address: 2711 TAMPA RD
City-St-Zip: PALM HARBOR, FL 34684 US

I hereby 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: MICHAEL A. PIKOS

PRES

04/18/2012

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