

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000030491

FILED
Feb 07, 2011
Secretary of State

Entity Name: FOXMOOR DENTAL LABORATORY, LLC

Current Principal Place of Business:

8004 SUMMERLIN LAKES DRIVE
FORT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

8004 SUMMERLIN LAKES DRIVE
FORT MYERS, FL 33907

New Mailing Address:

FEI Number: 26-2271364

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAKOS, SCOTT M
8004 SUMMERLIN LAKES DRIVE
FORT MYERS, FL 33907 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
Name: BAKOS, SCOTT M
Address: 8004 SUMMERLIN LAKES DRIVE
City-St-Zip: FORT MYERS, FL 33907

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: SCOTT M BAKOS

MGR

02/07/2011

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