

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000067540

**FILED**  
**Mar 01, 2011**  
**Secretary of State**

**Entity Name:** SUNSET LAKES DENTAL GROUP, LLC

**Current Principal Place of Business:**

18431 MIRAMAR PARKWAY  
MIRAMAR, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

6345 N.W. 26TH TERRACE  
BOCA RATON, FL 33496

**New Mailing Address:**

**FEI Number:** 26-3128613

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FENDRICH, LAURENCE E  
6345 NW 26TH TERRACE  
BOCA RATON, FL 33496 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  
Name: FENDRICH, LAURENCE F DMD  
Address: 6345 N.W. 26TH TERRACE  
City-St-Zip: BOCA RATON, FL 33496

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: LAURENCE E. FENDRICH

DR.

03/01/2011

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