

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000079876

FILED
Feb 26, 2010
Secretary of State

Entity Name: TALLAHASSEE DENTAL WORKZ, L.L.C.

Current Principal Place of Business:

6008 OX BOTTOM MANOR DRIVE
TALLAHASSEE, FL 32312

New Principal Place of Business:

Current Mailing Address:

PMB 205, 2910 KERRY FOREST PARKWAY
SUITE D4
TALLAHASSEE, FL 32309

New Mailing Address:

FEI Number: 26-3213060 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

POLK, ANTHONY D
6008 OX BOTTOM MANOR DRIVE
TALLAHASSEE, FL 32312 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: POLK, ANTHONY D D.D.S.
Address: 6008 OX BOTTOM MANOR DRIVE
City-St-Zip: TALLAHASSEE, FL 32312

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: ANTHONY D. POLK MGRM 02/26/2010

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