2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2010
Secretary of State

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Entity Name: HOMESTEAD DENTAL SPECIALTY PRACTICE MANAGEMENT, LLC

Current Principal Place of Business:

13195 S.W. 134TH STREET, 2ND FLOOR
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

13195 S.W. 134TH STREET, 2ND FLOOR
MIAMI, FL 33186

New Mailing Address:

FEI Number: 26-3838859 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOBER, MELVYN S D.D.S.
13195 S.W. 134TH STREET, 2ND FLOOR
MIAMI, FL 33186 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: TOWNCARE DENTAL PARTNERSHIP, INC
Address: 13195 SW 134TYH STREET, 2ND FLOOR
City-St-Zip: MIAMI, FL 33186

Title: MGRM
Name: OPG EQUITY, LLC
Address: 13195 SW 134TH STREET, 2ND FLOOR
City-St-Zip: MIAMI, FL 33186

Title: MGRM
Name: CHIU, GORDON DDS
Address: 13195 SW 134TH STREET, 2ND FLOOR
City-St-Zip: MIAMI, FL 33186

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 Statues.

SIGNATURE: GORDON CHIU, DDS MGMR 04/21/2010

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