2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 06, 2010
Secretary of State

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Entity Name: DENTASSIST MANAGEMENT & CONSULTING LLC

Current Principal Place of Business:

4309 NORTHPOINTE WAY
PENSACOLA, FL 32514

New Principal Place of Business:

Current Mailing Address:

4309 NORTHPOINTE WAY
PENSACOLA, FL 32514

New Mailing Address:

FEI Number: 26-3643865 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

WALLS, CHRISTINA
4309 NORTHPOINTE WAY
PENSACOLA, FL 32514 US

Name and Address of New Registered Agent:

KOLBECK, CHRISTINA M
4309 NORTHPOINTE WAY
PENSACOLA, FL 32514 US

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: CHRISTINA M. KOLBECK 09/06/2010
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: KOLBECK, CHRISTINA M
Address: 4309 NORTHPOINTE WAY
City-St-Zip: PENSACOLA, FL 32514

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: CHRISTINA M. KOLBECK MGR 09/06/2010
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date