# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**
**Mar 30, 2011**
**Secretary of State**

DOCUMENT# L08000114202

**Entity Name:** ECONOMY DENTURES OF LAKE MARY, LLC

**Current Principal Place of Business:**

890 S. SUN DRIVE
LAKE MARY, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

1680 DUNN AVENUE
SUITE 31
JACKSONVILLE, FL 32218

**New Mailing Address:**

**FEI Number: 80-0317584** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

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

SARRIS, GUST G
3947 BLVD. CENTER DRIVE
SUITE 101
JACKSONVILLE, FL 32207 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: LEROY R. POLITE, DMD, P.A.
Address: 1680 DUNN AVENUE, SUITE 31
City-St-Zip: JACKSONVILLE, FL 32218

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: LEROY R. POLITE D.M.D. LRP 03/30/2011

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