

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000009266

**FILED  
Mar 15, 2011  
Secretary of State**

**Entity Name:** PLANT CITY DENTAL SPECIALTY GROUP, LLC

**Current Principal Place of Business:**

623 E ALEXANDER ST.  
PLANT CITY, FL 33563 US

**New Principal Place of Business:**

**Current Mailing Address:**

515 CORNER ST.  
BANDON, FL 33511 US

**New Mailing Address:**

FEI Number: 26-4224955      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JUDITH S. LAMBERT, PLLC  
673 WEST LUMSDEN ROAD  
BRANDON, FL 33511 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: DAVIDSON, JACK A  
Address: 1165 NIKKI VIEW DR.  
City-St-Zip: BRANDON, FL 33511 US

Title: MGRM  
Name: OGUNTEBI, DURO  
Address: 110 NORTH ARMENIA AVENUE  
City-St-Zip: TAMPA, FL 33609 US

Title: MGRM  
Name: BUSCIGLIO ORTHODONTICS, P.A.  
Address: 515 CORNER STREET  
City-St-Zip: BRANDON, FL 33511 US

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: LOUISE PEZZUTTI

FC

03/15/2011

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