

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000019685

**FILED**  
**Apr 28, 2011**  
**Secretary of State**

**Entity Name:** ROYAL DENTAL AT THE VILLAGES, LLC

**Current Principal Place of Business:**

8493 SE 165TH MULBERRY LANE  
THE VILLAGES, FL 32162 US

**New Principal Place of Business:**

**Current Mailing Address:**

8493 SE 165TH MULBERRY LANE  
THE VILLAGES, FL 32162 US

**New Mailing Address:**

**FEI Number:** 26-4347577

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

AMERICAN SAFETY COUNCIL, INC.  
5125 ADANSON ST.  
SUITE 500  
ORLANDO, FL 32804 US

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

MIRTHA VALDES MARTIN, CPA  
420 SOUTH COUNTRY CLUB ROAD  
LAKE MARY, FL 32746 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: MIRTHA VALDES MARTIN

04/28/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: GAITAN, GERMAN  
Address: 9670 SWEETLEAF STREET  
City-St-Zip: ORLANDO, FL 32827 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: GERMAN GAITAN

MGRM

04/28/2011

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