

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000052715

FILED  
Mar 16, 2011  
Secretary of State

**Entity Name:** FRANKLIN DENTAL GROUP LLC

**Current Principal Place of Business:**

3110 W SAN MIGUEL ST  
TAMPA, FL 33629

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 18452  
TAMPA, FL 336792203

**New Mailing Address:**

**FEI Number:** 27-0657929

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FRANKLIN, KEVIN DR  
3110 W SAN MIGUEL ST  
TAMPA, FL 33629 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: MGR  
Name: FRANKLIN, KEVIN DR  
Address: 3110 W SAN MIGUEL ST  
City-St-Zip: TAMPA, FL 33629

Title: MGRM  
Name: FRANKLIN, BRIAN  
Address: 1325 MINERAL SPRINGS RD  
City-St-Zip: HOSCHTON, GA 30548

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: DR KEVIN FRANKLIN

MGR

03/16/2011

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