2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 24, 2011
Secretary of State

DOCUMENT# L09000113948

Entity Name: DENTAL SPECIALISTS OF NORTH FLORIDA LLC

Current Principal Place of Business:

3 CYPRESS BRANCH WAY
SUITE 107
PALM COAST, FL 32164

New Principal Place of Business:

Current Mailing Address:

3 CYPRESS BRANCH WAY SUITE 107
PALM COAST, FL 32164

New Mailing Address:

FEI Number: 27-1396570 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OCONNELL, WILLIAM H
2825 LEWIS SPEEDWAY
SUITE 104
ST AUGUSTINE, FL 32084 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: THOUSAND, ROBERT R JR
Address: 124 INLET DR
City-St-Zip: ST AUGUSTINE, FL 32080

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: ROBERT R THOUSAND JR MGRM 02/24/2011

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