

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000021329

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** TAMPA DENT COMPANY LLC

**Current Principal Place of Business:**

114 S. WESTLAND AVE.  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

114 S. WESTLAND AVE.  
TAMPA, FL 33606

**New Mailing Address:**

**FEI Number:** 27-1979490

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSEBERRY, JON T  
809 W. CORAL ST.  
TAMPA, FL 33602 US

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

ROSEBERRY, JON T  
114 S. WESTLAND AVE  
TAMPA, FL 33606 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: \_\_\_\_\_

Electronic Signature of Registered Agent

02/16/2011

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ROSEBERRY, JON T  
Address: 114 S. WESTLAND AVE.  
City-St-Zip: TAMPA, FL 33606

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: JON ROSEBERRY

MGRM

02/16/2011

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