

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000045587

Entity Name: DEANNE RIFE, DMD, LLC

FILED  
Feb 16, 2011  
Secretary of State

## Current Principal Place of Business:

5223 AVENDIA NAVARRA  
SARASOTA, FL 34242 US

## New Principal Place of Business:

5899 WHITFIELD AVE.  
#105  
SARASOTA, FL 34243 US

## Current Mailing Address:

5223 AVENDIA NAVARRA  
SARASOTA, FL 34242 US

## New Mailing Address:

5770 MIDNIGHT PASS RD.  
603C  
SARASOTA, FL 34242 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RIFE, DEANNE M  
5223 AVENDIA NAVARRA  
SARASOTA, FL 34242 US

## Name and Address of New Registered Agent:

RIFE, DEANNE M DR.  
5770 MIDNIGHT PASS RD  
603C  
SARASOTA, FL 34242 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: DEANNE M. RIFE, DMD

02/16/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: RIFE, DEANNE M DR  
Address: 5770 MIDNIGHT PASS RD 603C  
City-St-Zip: SARASOTA, FL 34242

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: DEANNE M RIFE, DMD

MGR

02/16/2011

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