

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000105476

**FILED**  
**Apr 13, 2011**  
**Secretary of State**

**Entity Name:** SUSAN H. JACQUOT, DDS, PL

**Current Principal Place of Business:**

1626 SOUTH CONWAY ROAD  
ORLANDO, FL 32812

**New Principal Place of Business:**

2714 HOFFNER AVE  
ORLANDO, FL 32812

**Current Mailing Address:**

1626 SOUTH CONWAY ROAD  
ORLANDO, FL 32812

**New Mailing Address:**

2714 HOFFNER AVE  
ORLANDO, FL 32812

**FEI Number:** 27-3636748

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JACQUOT, DAVID L ESQ.  
1626 SOUTH CONWAY ROAD  
ORLANDO, FL 32812 US

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

JACQUOT, DAVID L ESQ.  
2714 HOFFNER AVE  
ORLANDO, FL 32812 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: DAVID L JACQUOT, ESQ

04/13/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JACQUOT, SUSAN H  
Address: 2714 HOFFNER AVENUE  
City-St-Zip: ORLANDO, FL 32812

Title: MGR  
Name: JACQUOT, DAVID L  
Address: 2714 HOFFNER AVENUE  
City-St-Zip: ORLANDO, FL 32812

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: DAVID L. JACQUOT

MGR

04/13/2011

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