

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000118806

**FILED**  
**Apr 24, 2012**  
**Secretary of State**

**Entity Name:** DANIEL A. WELDON, D.M.D., PLLC

**Current Principal Place of Business:**

812 N.E. 25TH AVENUE  
OCALA, FL 34470

**New Principal Place of Business:**

812 N.E. 25TH AVENUE  
B  
OCALA, FL 34470

**Current Mailing Address:**

812 N.E. 25TH AVENUE  
OCALA, FL 34470

**New Mailing Address:**

812 N.E. 25TH AVENUE  
B  
OCALA, FL 34470

**FEI Number:** 27-3981704

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SHOCHET LAW GROUP  
4897 JOG ROAD  
GREENACRES, FL 33467 US

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

WELDON, DANIEL A  
1027 SE 8TH ST  
OCALA, FL 34471 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: DANIEL WELDON

04/24/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WELDON, DANIEL A  
Address: 812 N.E. 25TH AVENUE SUITE B  
City-St-Zip: Ocala, FL 34470

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: DANIEL WELDON

MGRM

04/24/2012

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