

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000056876

FILED
Jan 22, 2012
Secretary of State

Entity Name: OCEANSIDE ENDODONTICS OF ST. AUGUSTINE, P.L.

Current Principal Place of Business:

2510 U.S. HWY 1 SOUTH
SUITE B
ST. AUGUSTINE, FL 32086

New Principal Place of Business:

2510 U.S. HWY 1 SOUTH
SUITE B
ST. AUGUSTINE, FL 32086 US

Current Mailing Address:

2510 U.S. HWY 1 SOUTH
SUITE B
ST. AUGUSTINE, FL 32086

New Mailing Address:

2510 U.S. HWY 1 SOUTH
SUITE B
ST. AUGUSTINE, FL 32086 US

FEI Number: 45-2671661

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAIER, FRANK P
4041-B NW 37TH PLACE
GAINESVILLE, FL 32606 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: TYLER, EMILY DMD
Address: 2510 U.S. HWY 1 SOUTH, SUITE B
City-St-Zip: ST. AUGUSTINE, FL 32086 US

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: EMILY TYLER

MGRM

01/22/2012

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