

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000088541

FILED
Mar 30, 2012
Secretary of State

Entity Name: ADVANCED DENTAL ANESTHETICS, LLC

Current Principal Place of Business:

8708 PERIMETER PARK BLVD
SUITE 1
JACKSONVILLE, FL 32216

New Principal Place of Business:

Current Mailing Address:

8708 PERIMETER PARK BLVD
SUITE 1
JACKSONVILLE, FL 32216

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SKIGEN, ANDREW L
8708 PERIMETER PARK BLVD
SUITE 1
JACKSONVILLE, FL 32216 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: MGMR
Name: SKIGEN, ANDREW
Address: 8708 PERIMETER PARK BLVD SUITE 1
City-St-Zip: JACKSONVILLE, FL 32216

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: ANDREW SKIGEN

PRES

03/30/2012

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