

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000001551

**FILED**  
**Feb 09, 2012**  
**Secretary of State**

**Entity Name:** LESLIE A. LITTLE, D.M.D., P.A.

**Current Principal Place of Business:**

777 N ASHLEY DR #1314  
TAMPA, FL 33602

**New Principal Place of Business:**

**Current Mailing Address:**

777 N ASHLEY DR #1314  
TAMPA, FL 33602

**New Mailing Address:**

**FEI Number:** 45-0771214

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAVIS, KEVIN M ESQ.  
777 N ASHLEY DR #1314  
TAMPA, FL 33602 US

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

RELIANCE CONSULTING LLC  
13940 N DALE MABRY HWY  
TAMPA, FL 33618 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: AMOL NIRGUDKAR

02/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PSTD  
Name: LITTLE, LESLIE A  
Address: 777 N ASHLEY DR #1314  
City-St-Zip: TAMPA, FL 33602

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LESLIE A LITTLE

PSTD

02/09/2012

Electronic Signature of Signing Officer or Director

Date