## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000055070

Entity Name: LENA JOHNSON DDS, LLC

**Current Principal Place of Business:** 

50 WINDSORMERE WAY SUITE 1020 OVIEDO, FL 32765 FILED
Apr 19, 2014
Secretary of State
CC8686829554

## **Current Mailing Address:**

P O BOX 621064 OVIEDO, FL 32762 US

FEI Number: 41-2028822 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JOHNSON, LENA 50 WINDSORMERE WAY SUITE 1020 OVIEDO, FL 32765 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:

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title MGRM

Name JOHNSON, LENA
Address P.O. BOX 621064
City-State-Zip: OVIEDO FL 32762

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail