## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000052715

Entity Name: FRANKLIN DENTAL GROUP LLC

**Current Principal Place of Business:** 

9126 TOWN CENTER PKWY STE 101

LAKEWOOD RANCH, FL 34202

**Current Mailing Address:** 

9126 TOWN CENTERPKWY SUITE 101

LAKEWOOD RANCH, FL 34202 US

FEI Number: 27-0657929 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRANKLIN, KEVIN A 3110 W SAN MIGUEL ST TAMPA, FL 33629 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: KEVIN A FRANKLIN 07/03/2017

Electronic Signature of Registered Agent

Date

**FILED** Jul 03, 2017

**Secretary of State** 

CC1380755829

Authorized Person(s) Detail:

SIGNATURE: BRIAN FRANKLIN

Title MGR Title **MGRM** 

FRANKLIN, KEVIN DR Name Name FRANKLIN, BRIAN

3110 W SAN MIGUEL ST 6609 BUTTONBUSH CT Address Address

City-State-Zip: LAKEWOOD RANCH FL 34202 City-State-Zip: TAMPA FL 33629

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.

**MGRM**