

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000053061

Entity Name: MOURSELAS DENTAL PLLC

Current Principal Place of Business:

201 8TH ST SOUTH
SUITE 106
NAPLES, FL 34102

Current Mailing Address:

201 8TH ST SOUTH
SUITE 106
NAPLES, FL 34102 US

FEI Number: 27-2596533

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOURSELAS, DEAN
201 8TH ST SOUTH
SUITE 106
NAPLES, FL 34102 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 MOURSELAS, DEAN
Address 201 8TH ST SOUTH, SUITE 106
City-State-Zip: NAPLES FL 34102

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.

SIGNATURE: DEAN MOURSELAS

PRESIDENT

02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date