

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000023918

**Entity Name:** POMPANO BEACH PERIODONTICS, PLLC

**Current Principal Place of Business:**

2231 NORTHEAST 25TH AVENUE  
SUITE 4  
POMPANO BEACH, FL 33062

**Current Mailing Address:**

2231 NORTHEAST 25TH AVENUE  
SUITE 4  
POMPANO BEACH, FL 33062 US

**FEI Number:** 27-5250306

**Certificate of Status Desired:** Yes

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

WITONSKY, JASON A  
2231 NE 25TH AVE  
SUITE 4  
POMPANO BEACH, FL 33062 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:** JASON WITONSKY

03/11/2014

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name RANDY GOLDFARB, D.M.D., -  
POMPANO P.A.  
Address 951 NW 13TH STREET, SUITE 3A  
City-State-Zip: BOCA RATON FL 33486

Title MGRM  
Name JASON A. WITONSKY, D.M.D., M.S.,  
P.A.  
Address 3271 HARRINGTON DRIVE  
City-State-Zip: BOCA RATON FL 33496

*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:** JASON WITONSKY

MANAGING MEMBER

03/11/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date