

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000115880

Entity Name: DAVID TARNOWSKI, D.M.D., P.L.

Current Principal Place of Business:

4520 W. GRAY STREET
TAMPA, FL 33609

Current Mailing Address:

4520 W. GRAY STREET
TAMPA, FL 33609

FEI Number: 45-3608015

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TARNOWSKI, DAVID
4520 W. GRAY ST.
TAMPA, FL 33609 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 MGR
Name TARNOWSKI, DAVID D.M.D.
Address 4520 W. GRAY STREET
City-State-Zip: TAMPA FL 33609

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: DAVID TARNOWSKI

MANAGER

03/20/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date