

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000081471

Entity Name: DENTAL ARTS OF WINTER HAVEN LLC

Current Principal Place of Business:

151 AVE F. NW
WINTER HAVEN, FL 33881

Current Mailing Address:

151 AVE F. NW
WINTER HAVEN, FL 33881

FEI Number: 59-3417334

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PALO, PAUL A
151 AVE. F. NW
WINTER HAVEN, FL 33881 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 PALO, BRONWYN B
Address 25 SKIDMORE RD.
City-State-Zip: WINTER HAVEN FL 33884

Title MGR
Name PALO, PAUL A
Address 151 AVE F. NW
City-State-Zip: WINTER HAVEN FL 33881

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: PAUL A PALO, DMD

OWNER

03/22/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date