2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 23, 2013
Secretary of State
CC1325665371

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Entity Name: ADVANCED DENTAL CARE (PALM COAST), PL

Current Principal Place of Business:

3 PINE CONE DRIVE
SUITE 108
PALM COAST, FL 32137

Current Mailing Address:

6240 LAKE OSPREY DRIVE
SARASOTA, FL 34240

FEI Number: 46-0901603

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NICHOLS, DAVID P
6240 LAKE OSPREY DRIVE
SARASOTA, FL 34240 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	MONTILLA, MIGUEL DMD
Address	3 PINE CONE DRIVE
City-State-Zip:	PALM COAST FL 32137

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: MIGUEL MONTILLA MGR 04/23/2013

Electronic Signature of Signing Authorized Person(s) Detail — Date