

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000045260

**Entity Name:** MEGALODONTIST CONSULTANTS LLC

**Current Principal Place of Business:**

3928 FREEDOM AVE  
SARASOTA, FL 34231

**Current Mailing Address:**

3928 FREEDOM AVE  
SARASOTA, FL 34231 US

**FEI Number:** 30-0778621

**Certificate of Status Desired:** No

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

WERPEN, KNUT E PRES  
3928 FREEDOM AVE  
SARASOTA, FL 34231 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:** KNUT E WERPEN

03/02/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title VP  
Name WERPEN , KNUT ERIK  
Address 275 WASHINGTON AVE  
City-State-Zip: ENGLEWOOD FL 34223

*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:** KNUT WERPEN

PRESIDENT

03/02/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date