

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000114370

Entity Name: JUSTIN C. CRAIGHEAD, DMD, MS, PL

Current Principal Place of Business:

8847 SW 80TH AVE.
GAINESVILLE, FL 32608

Current Mailing Address:

8847 SW 80TH AVE.
GAINESVILLE, FL 32608

FEI Number: 46-3426210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAIGHEAD, JUSTIN C DR.
8847 SW 80TH AVE.
GAINESVILLE, FL 32608 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: JUSTIN C CRAIGHEAD

01/25/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name CRAIGHEAD, JUSTIN C
Address 8847 SW 80TH AVE.
City-State-Zip: GAINESVILLE FL 32608

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: JUSTIN C CRAIGHEAD

PRESIDENT/OWNER

01/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date