## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000105630

Entity Name: SAGE DENTAL OF WINTER PARK, PLLC

**Current Principal Place of Business:** 

6600 CONGRESS AVENUE SUITE 150

BOCA RATON, FL 33487

**Current Mailing Address:** 

6600 CONGRESS AVENUE **SUITE 150** BOCA RATON, FL 33487 US

FEI Number: 47-1258940 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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: LORI ALLISON 02/27/2025

Electronic Signature of Registered Agent

Date

**FILED** Feb 27, 2025

**Secretary of State** 

5377311979CC

Authorized Person(s) Detail:

Address

**PRESIDENT** Title Title **MANAGER** 

ROARK, CINDY Name Name SAGE DENTAL GROUP OF FLORIDA,

**PLLC** 

6600 CONGRESS AVENUE Address 6600 CONGRESS AVENUE SUITE 150

SUITE 150

BOCA RATON FL 33487 City-State-Zip: City-State-Zip: BOCA RATON FL 33487

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: LORI ALLISON

DIRECTOR OF **PURCHASING &** SUPPORT SERVICES

02/27/2025