## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000145375

Entity Name: BAYSHORE DENTAL LABS LLC

**Current Principal Place of Business:** 

298 SHORE DR

PALM HARBOR, FL 34683

**Current Mailing Address:** 

PO BOX 820

**OZONA. FL 34660** 

FEI Number: 47-1887028 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUTCH, BARBARA R 298 SHORE DR

PALM HARBOR, FL 34683 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

FILED Mar 24, 2016

**Secretary of State** 

CC3776782822

Authorized Person(s) Detail:

Title PRES Title

NameFUTCH, BARBARA RNameFUTCH, ROBERT SAddress298 SHORE DRAddress298 SHORE DR

City-State-Zip: PALM HARBOR FL 34683 City-State-Zip: PALM HARBOR FL 34683

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: BARBARA R FUTCH

PRESIDENT

VΡ

03/24/2016

Date