

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000172358

Entity Name: JACOBS AND THATCHER DENTISTRY, PLLC

Current Principal Place of Business:

1601 RICKENBACKER DRIVE
SUITE #7
SUN CITY CENTER, FL 33573

Current Mailing Address:

1601 RICKENBACKER DRIVE
SUITE #7
SUN CITY CENTER, FL 33573

FEI Number: 47-2293210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JACOBS, T. GREGORY
1601 RICKENBACKER DRIVE
SUITE #7
SUN CITY CENTER, FL 33573 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 T. GREGORY JACOBS, D.D.S., P.A.
Address 1601 RICKENBACKER DRIVE, SUITE #7
City-State-Zip: SUN CITY CENTER FL 33573

Title MGR
Name BRYAN R. THATCHER, D.M.D., P.A.
Address 1601 RICKENBACKER DRIVE, SUITE #7
City-State-Zip: SUN CITY CENTER FL 33573

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: T. GREGORY JACOBS

MGR

03/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date