

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000011781

**Entity Name:** JOHN P. LONGMIRE, III DDS, LLC

**Current Principal Place of Business:**

5166 STERLING MANOR DR  
SUITE C-305  
TAMPA, FL 33647

**Current Mailing Address:**

5166 STERLING MANOR DR  
SUITE C-305  
TAMPA, FL 33647

**FEI Number:** 81-1191444

**Certificate of Status Desired:** No

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

JENSEN, PAUL C  
2001 16TH STREET NORTH  
SUITE C-305  
ST. PETERSBURG, FL 33704 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 LONGMIRE, JOHN P III  
Address 5166 STERLING MANOR DRIVE  
City-State-Zip: TAMPA FL 33647

*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:** JOHN P. LONGMIRE, III

MGR

01/12/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date