

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000019483

**Entity Name:** JEFFREY ALLEN DMD LLC

**Current Principal Place of Business:**

242 SYKES POINT LANE  
MERRITT ISLAND, FL 32953

**Current Mailing Address:**

500 KNIGHTS RUN AVE  
UNIT 1813  
TAMPA, FL 33602 US

**FEI Number:** 83-3235414

**Certificate of Status Desired:** No

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

LOCKARD, VICTORIA  
3960 S BANANA RIVER BLVD  
COCOA BEACH, FL 32931 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 ALLEN, JEFFREY DMD

Address 242 SYKES POINT LANE

City-State-Zip: MERRITT ISLAND FL 32953

*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:** JEFFREY ALLEN

MGR

07/26/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date