

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000216728

Entity Name: BRYAN P. VILLESCHAS DENTISTRY PLLC

Current Principal Place of Business:

2496 CARING WAY
UNIT A
PORT CHARLOTTE, FL 33952

Current Mailing Address:

2496 CARING WAY
UNIT A
PORT CHARLOTTE, FL 33952 US

FEI Number: 86-3885351

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILLESCHAS, BRYAN P
2496 CARING WAY
UNIT A
PORT CHARLOTTE, FL 33952 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 VILLESCHAS, BRYAN P DR.
Address 2496 CARING WAY
UNIT A
City-State-Zip: PORT CHARLOTTE FL 33952

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: BRYAN VILLESCHAS

MGR

03/04/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date