

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000022512

**Entity Name:** DANIEL MANDIC, DDS PLLC

**Current Principal Place of Business:**

25492 COCKLESHELL DR  
105  
BONITA SPRINGS, FL 33145

**Current Mailing Address:**

25492 COCKLESHELL DR  
105  
BONITA SPRINGS, FL 33145 US

**FEI Number:** 92-1875658

**Certificate of Status Desired:** No

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

MANDIC, DANIEL  
25492 COCKLESHELL DR  
105  
BONITA SPRINGS, FL 33145 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 MBR  
Name MANDIC, DANIEL  
Address 25492 COCKLESHELL DR  
105  
City-State-Zip: BONITA SPRINGS FL 33145

*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:** DANIEL MANDIC

MBR

03/14/2024

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

\_\_\_\_\_  
Date