

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 604041

**Entity Name:** ROBERT D. HELMHOLDT, D.D.S., P.A.

**Current Principal Place of Business:**

1732 NE 26TH STREET  
SUITE 201  
FT. LAUDERDALE, FL 33305

**Current Mailing Address:**

1732 NE 26TH STREET  
SUITE 201  
FT. LAUDERDALE, FL 33305 US

**FEI Number:** 59-1439043

**Certificate of Status Desired:** No

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

HELMHOLDT, ROBERT D.  
1732 NE 26TH STREET  
SUITE 201  
FT. LAUDERDALE, FL 33305 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

**Officer/Director Detail :**

Title VD  
Name MACK, M. ROBERT  
Address 2300 E. LAS OLAS BLVD.  
City-State-Zip: FT. LAUDERDALE FL 33301

Title SD  
Name LASALLE, THOMAS  
Address 75 NE 6TH AVE.  
City-State-Zip: DELRAY BEACH FL 33483

Title PTD  
Name HELMHOLDT, ROBERT D.  
Address 1732 NE 26TH ST.  
SUITE 201  
City-State-Zip: FT. LAUDERDALE FL 33305

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ROBERT HELMHOLDT

PTD

03/29/2016

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date