

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000027058

**Entity Name:** RONALD HOWLAND, D.M.D., P.A.

**Current Principal Place of Business:**

3209 SAWGRASS VILLAGE CIRCLE  
PONTE VEDRA BEACH, FL 32082

**Current Mailing Address:**

3209 SAWGRASS VILLAGE CIRCLE  
PONTE VEDRA BEACH, FL 32082 US

**FEI Number:** 59-3570723

**Certificate of Status Desired:** No

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

SMITH, PARKER B  
1219 AIRPORT RD STE 311  
DESTIN, FL 32541 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 DR  
Name HOWLAND, RONALD  
Address 12 ASPEN LEAF DR  
City-State-Zip: PONTE VEDRA BEACH FL 32081

*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:** RONALD HOWLAND

**DIRECTOR**

**01/10/2024**

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

\_\_\_\_\_  
Date