2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604041

Name:

Address:

City-St-Zip:

HELMHOLDT, ROBERT D.,

1700 NE 26TH ST.

FT. LAUDERDALE, FL

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

FILED Jan 27, 2009 Secretary of State

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Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
	6TH STREET ERDALE, FL	-			
Current M	lailing Addre	ess:	New Mailing Address	New Mailing Address:	
	6TH STREE1 ERDALE, FL	-			
FEI Number	: 59-1439043	FEI Number Applied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of	Current Registered Agei	nt: Name and Address o	Name and Address of New Registered Agent:	
The above	e of Florida.		the purpose of changing its registered	d office or registered agent, or both,	
	Electro	nic Signature of Registere	d Agent	Date	
Election Car	mpaign Financi	ng Trust Fund Contribution ().		
OFFICER	S AND DIRE	CTORS:	ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	VD (MACK, M. RO 2300 E. LAS (FT. LAUDERE	DLAS BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD (LASALLE, TH 75 NE 6TH AV DELRAY BEA	Æ.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	PTD () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ROBERT D HELMHOLDT PRES 01/27/2009