

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000082803

FILED  
May 01, 2008  
Secretary of State

Entity Name: DOUGLAS F. POHL, D.D.S., P.A.

## Current Principal Place of Business:

31 PERRY AVENUE, S.E.  
FORT WALTON BEACH, FL 32548

## New Principal Place of Business:

31 PERRY AVENUE, S.E.  
FORT WALTON BEACH, FL 32548 US

## Current Mailing Address:

31 PERRY AVENUE, S.E.  
FORT WALTON BEACH, FL 32548

## New Mailing Address:

31 PERRY AVENUE, S.E.  
FORT WALTON BEACH, FL 32548 US

FEI Number: 20-1168528

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HELMICH, KEVIN M  
4481 LEGENDARY DRIVE  
STE. 200  
DESTIN, FL 32541 US

## Name and Address of New Registered Agent:

HELMICH, KEVIN M ESQUIRE  
4481 LEGENDARY DRIVE  
SUITE 200  
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: KEVIN M. HELMICH

05/01/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: POHL, DOUGLAS F  
Address: 31 PERRY AVENUE, S.E.  
City-St-Zip: FORT WALTON BEACH, FL 32548

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: POHL, DOUGLAS F  
Address: 31 PERRY AVENUE, S.E.  
City-St-Zip: FORT WALTON BEACH, FL 32548 US

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.

SIGNATURE: DOUGLAS F. POHL

PSTD

05/01/2008

Electronic Signature of Signing Officer or Director

Date