

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P04000019243

**Entity Name:** L. ROBERT WELLER, DMD, P.A.

**Current Principal Place of Business:**

12466 LAKE UNDERHILL DR  
ORLANDO, FL 32828

**Current Mailing Address:**

12466 LAKE UNDERHILL DR  
ORLANDO, FL 32828

**FEI Number:** 20-0752870

**Certificate of Status Desired:** No

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

WELLER, L. ROBERT  
12466 LAKE UNDERHILL DR  
ORLANDO, FL 32828 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 PD  
Name WELLER, L. ROBERT  
Address 12466 LAKE UNDERHILL DR  
City-State-Zip: ORLANDO FL 32828

*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:** L. ROBERT WELLER

**PRESIDENT, DENTIST**

**04/02/2020**

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

\_\_\_\_\_  
Date