

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000093448

Entity Name: ROBERT M. WILLIAMS, D.D.S., P.A.

Current Principal Place of Business:

6700 CROSSWINDS DRIVE NORTH
STE 200C
SAINT PETERSBURG, FL 33710

Current Mailing Address:

6700 CROSSWINDS DRIVE NORTH
STE 200C
SAINT PETERSBURG, FL 33710 US

FEI Number: 65-0544936

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, ROBERT M
6700 CROSSWIND DR NORTH
STE 200C
ST PETERSBURG, FL 33710 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 D
Name WILLIAMS, ROBERT M
Address 163 22ND AVE NORTH
City-State-Zip: ST PETERSBURG FL 33710

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 M. WILLIAMS DDS

OWNER

04/19/2016

Electronic Signature of Signing Officer/Director Detail

Date