

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000048912

**FILED**  
**Apr 18, 2011**  
**Secretary of State**

**Entity Name:** NAZARIO EYE ASSOCIATES, O.D., P.A.

**Current Principal Place of Business:**

101 HOWLAND BLVD  
DELTONA, FL 32738 US

**New Principal Place of Business:**

**Current Mailing Address:**

965 PARNELL CT  
DELTONA, FL 32738 US

**New Mailing Address:**

**FEI Number:** 59-3726894

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NAZARIO, CALVIN  
101 HOWLAND BLVD  
DELTONA, FL 32738 US

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

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: NAZARIO, CALVIN  
Address: 101 HOWLAND BLVD  
City-St-Zip: DELTONA, FL 32738 US

Title: VP  
Name: NAZARIO, ALBA  
Address: 101 HOWLAND BLVD  
City-St-Zip: DELTONA, FL 32738 US

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: CALVIN NAZARIO

P

04/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date