

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 601377

FILED
Feb 09, 2011
Secretary of State

Entity Name: ERICKSON, COSTELLO, BUTLER, ERICKSON, OPTOMETRIST, P.A.

Current Principal Place of Business:

1280 W. LANTANA RD.
SUITE 1
LANTANA, FL 33462

New Principal Place of Business:

Current Mailing Address:

1280 W. LANTANA RD.
SUITE 1
LANTANA, FL 33462

New Mailing Address:

FEI Number: 59-1272975

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ERICKSON, NEIL E
1280 W. LANTANA RD.
SUITE 1
LANTANA, FL 33462 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: ERICKSON, NEIL E OD
Address: 420 NO. COUNTRY CLUB DR
City-St-Zip: LANTANA, FL 33462

Title: VP
Name: COSTELLO, SANDY L OD
Address: 476 GLENBROOK
City-St-Zip: LANTANA, FL 33462

Title: TRE
Name: ERICKSON, TODD E OD
Address: 5770 LAGO DEL SOL DRIVE
City-St-Zip: LAKE WORTH, FL 33467 US

Title: ST
Name: BUTLER, DAVID S OD
Address: 4749 BUCIDA RD
City-St-Zip: BOYNTON BEACH, FL 33436

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: NEIL E ERICKSON

P

02/09/2011

Electronic Signature of Signing Officer or Director

Date