


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 26, 2004 08:00 AM
Secretary of State

DOCUMENT # 647112
 1. Entity Name
JOSEPH C. NAGELSEN, JR., D.D.S., P.A.



Principal Place of Business
**892 GOLFVIEW TERR
 WINTER PARK, FL 32789**

Mailing Address
**201 N LAKEFRONT AVE
 WINTER PARK, FL 32792**



07152004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1949722 Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**NAGELSEN, JOSEPH C., JR.
 201 NORTH LAKEMONT
 WINTER PARK, FL 32789**



8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE **07/26/04**
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

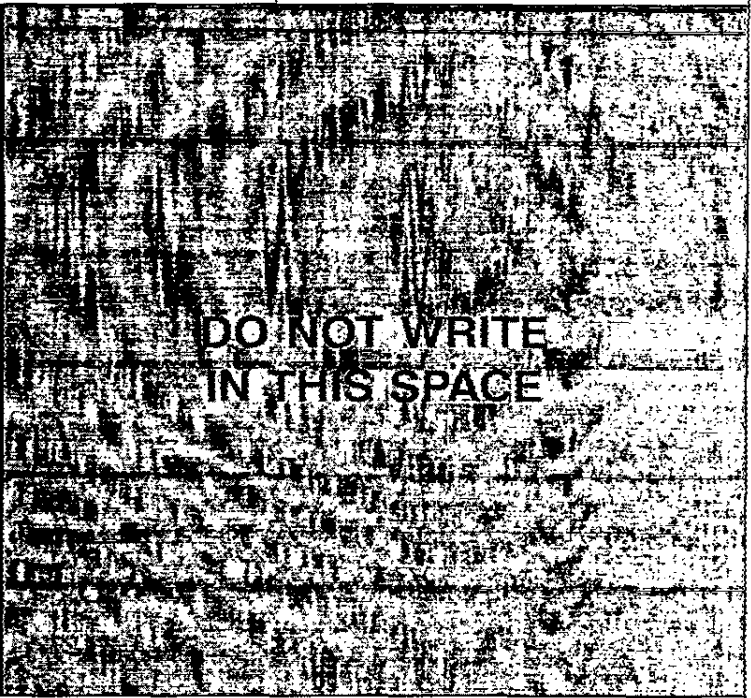
**FILE NOW!!! FEE IS \$150.00
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NAGELSEN, JAMES 415 BRIGHTWATER BLVD ST PETERSBURG, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST NAGELSEN, JOSEPH C JR 201 N LAKEMONT WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAWTON, THOMAS 201 N LAKEMONT AVE WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	



12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Joseph C Nagelsen Jr Date: 7-21-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #: 407-644-1455