


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 04, 2005 8:00 am
Secretary of State

03-09-2005 90036 047 ***150.00

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



Principal Place of Business Mailing Address
**892 GOLFVIEW TERR
WINTER PARK, FL 32789** **201 N LAKEFRONT AVE
WINTER PARK, FL 32792**

66008352



01242005 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: *Joseph C Nagelsen Jr* DATE: **3-3-05**
(NOTE: Registered Agent signature required when releasing)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

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: **3-30-05** DAYTIME PHONE #: **407-644-1455**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #