


2008 FOR PROFIT CORPORATION ANNUAL REPORT

3/ FILED
 Apr 21, 2008 8:00 am
 Secretary of State
 03-27-2008 90024 018 ***150.00

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

66007330



03042008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

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

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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* (NOTE: Registered Agent signature required when reinstating)
 DATE: 3-15-08

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

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

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Jos. C. Nagelsen Jr* *Joseph C Nagelsen Jr* 4-16-08 401-644-1455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #