FILED Jan 24, 2008 08:00 Al Secretary of State

Applied For

Not Applicable

	ANNUAL REPORT	
DOC	UMENT # F16766	Γ
1. Entity N	Name	L



Principal Place of Business % THEODORE SIMON 2423 BEE RIDGE ROAD

SARASOTA, FL 34239

SIGNATURE: _

THEODORE SIMON, D.C., P.A.

Mailing Address

% THEODORE SIMON 2423 BEE RIDGE ROAD SARASOTA, FL 34239



DO NOT WRITE IN THIS SPACE

01092008	No Cha-P	CR2E034 (11/05)	

4. FEI Number 59-2069522

			5. Certificate of Sta	atus Desired 🔲	\$8.75 Additional Fee Required	
·	6. Name and Address of Current Regis			, .	the state of	
2423 BEE	HEODORE RIDGE ROAD FA, FL 34239	DO NOT WRITE IN THIS SPACE				
	named entity submits this statement for the plions of registered agent.	ourpose of changing its registers	ed office or register	ed agent, or both, in I	the State of Florida. I	am familiar with, and accept
SIGNATURE.	3					
<u> </u>	Signature, typed or printed name of registered agent and title i	ii applicable. [IND IE. Registered	Agent signature required	when reinstating)	DA	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.		00 May Be ed to Fees	U000007 01/28/08-8	'95362 00045-006 150.0
10.	OFFICERS AND DIREC	CTORS				
NAME STREET ADDRESS CITY-ST-ZIP	DP SIMON, THEODORE 2423 BEE RIDGE ROAD SARASOTA, FL 34239				e de la companya de l	ne n
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP				DO N	OT WRI	TE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN TH	IIS SPAC	E ,
TITLE NAME STREET ADDRESS CITY-ST-ZIP					en e	0,4
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Company of the Compan	. Vigit	,			garge ga gada ya mada marab ma m ga ga g
12. I hereby of indicated of the corchanged,	certify that the information supplied with this fill on this report or supplemental report is five a poration or the receiver or trustee empowered or on an attachment with an address, with all	ing does not qualify for the exe nd accorate and that my signate to execute this report as requir other line empowered.	mptions contained ure shall have the s ed by Chapter 607	in Chapter 119, Flori came legal effect as if Florida Statutes, and	da Statutes. I further made under oath; that I that my name appea	certify that the information kt am an officer or director rs in Block 10 or Block 11 if