

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18721

FILED
Apr 24, 2008
Secretary of State

Entity Name: PALATKA OPTICAL SHOP, INC.

Current Principal Place of Business:

3710 ST JOHNS AVE
PALATKA, FL 32177 US

New Principal Place of Business:

Current Mailing Address:

3710 ST JOHNS AVE
PALATKA, FL 32177 US

New Mailing Address:

FEI Number: 59-2105955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, LARRY A.
3710 ST JOHNS AVE
PALATKA, FL 32177 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: CARROLL LAWRENCE A,
Address: 3710 ST JOHNS AVE
City-St-Zip: PALATKA, FL

Title: PTD () Delete
Name: CARROLL, LAWRENCE A.,
Address: 3710 ST JOHNS AVE
City-St-Zip: PALATKA, FL

Title: VSD () Delete
Name: FOERSTER, LISA R.,
Address: 3710 ST JOHNS AVE
City-St-Zip: PALATKA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: CARROLL LAWRENCE A,
Address: 3710 ST JOHNS AVE
City-St-Zip: PALATKA, FL 32177 US

Title: PTD (X) Change () Addition
Name: CARROLL, LAWRENCE A.,
Address: 3710 ST JOHNS AVE
City-St-Zip: PALATKA, FL 32177 US

Title: VSD (X) Change () Addition
Name: FOERSTER, LISA R.,
Address: 3710 ST JOHNS AVE
City-St-Zip: PALATKA, FL 32177 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LISA R. FOERSTER

VP

04/24/2008

Electronic Signature of Signing Officer or Director

Date