FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L11710

10 (5)

VICTOR T. NOTHNAGEL, O.D., P.A.

FILED Mar 05 1998 8:00am Secretary of State

VICTOR	I NOTHINAGEL, O.D., P.A	,•				,			
Origannal Place	of Pusineer	Mailing Address			•	_			
Principal Place of Business									
C/O VICTOR T. 2332 HIGHWAY		C/O VICTOR T. NOTHNAGEL 2332 HIGHWAY 44 WEST							
INVERNESS FL		INVERNESS FL 34453					DO NOT WRITE IN THIS SPACE		
US		US				1 8	3. Date Incorporated or Qualified		İ
A Dringland Dia	on of Principage	2a. Mailing Addres					08/28/1989 4, FEI Number		plied For
2. Principal Pla	Ce or business	26 26					59-2964260		t Applicable
Suite, Apt. #	aic	Suite, Apt. #, etc.						\$9.75	
22	. 2.3	27					5. Certificate of Status Desired	Fee Re	
City & State		City & State				-	Election Campaign Financing	\$5.00	May Be
23		28	28				Trust Fund Contribution		
Zip	Country Zip Cou			ountry	,		B. This corporation owes or has paid th		
24	25	29	30				Personal Property Tax due June 30.		J No
	9. Name and Address of Current	t Registered Agent		81	\$1	1	O. Name and Address of New Regist	ered Agent	
	HNAGEL, VICTOR T.			81	Name				
	HIGHWAY 44 WEST					ddress	(P.O. Box Number Is Not Acceptable)		
INVE	RNESS FL 34453								
				83					
				84	City			FL 85 Zip C	Code
54 Durament to	the provisions of Sections 607.0500	2 and 607 1508 Florids	Statutes the	e hove	a-named co	ornorati	ion submits this statement for the number	ose of changing its	s registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE _	Ignature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Regist	ered Ago	ent signature rec	equired wh	nen reinstating) D	ATE	
12.	OFFICERS AND		1:	3.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTOR	S IN 12
TITLE	PT □ DELETE 1.11		1 TITLE				☐ Change	Addition	
NAME	NOTHNAGEL, VICTOR		1.2 NAM						
STREET ADDRESS	I = ::		1.3 ST		ADDRESS				
CITY-ST-ZIP	INVERNESS FL 34453			1.4 CITY-ST-ZIP					
TITLE	VS	☐ DELE	TE 2.	TITLE	_ ,	ווחוו	INAGELIVIRGINIA	S XI Change	☐ Addition
NAME	NOTHNAGLE, VIRGINIA S					Moi	(1010 = -)	_	İ
STREET ADDRESS	2332 HWY. 44, WEST		•		2.3 STREET ADDRESS				-
CITY-ST-ZIP					2. 4 CITY - ST - ZIP			☐ Change	Addition
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NAME					3.2 NAME 3.3 STREET ADDRESS				1
STREET ADDRESS									
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NAME					ADDRESS				
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CITY-ST-ZIP TITLE		☐ DELE		1 TITLE	-1- ZIF	•		Change	Addition
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STREET ADDRESS					ADORESS				
CITY-ST-ZIP				4 CITY - S					
TITLE		DELE		I TITLE				Change	Addition
NAME		_ -		2 NAME					j
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			6.4 CITY-ST-ZIP						
	· 		115 6 11				Canada OZ/OVO Flavida Castidas I fout		lada yan adi au

14. 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 annual report or supplemental annual 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 true the empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

2/24/98 352-72/-705