

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L11710

FILED
Mar 23, 2009
Secretary of State

Entity Name: VICTOR T. NOTHNAGEL, O.D., P.A.

Current Principal Place of Business:

C/O VICTOR T. NOTHNAGEL
2332 HIGHWAY 44 WEST
INVERNESS, FL 34453 US

New Principal Place of Business:

Current Mailing Address:

C/O VICTOR T. NOTHNAGEL
2332 HIGHWAY 44 WEST
INVERNESS, FL 34453 US

New Mailing Address:

FEI Number: 59-2964260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOTHNAGEL, VICTOR T.
2332 HIGHWAY 44 WEST
INVERNESS, FL 34453 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: PT () Delete
Name: NOTHNAGEL, VICTOR,
Address: 2332 HWY 44 WEST
City-St-Zip: INVERNESS, FL 34453

Title: VS () Delete
Name: NOTHNAGEL, VIRGINIA S
Address: 2332 HWY. 44, WEST
City-St-Zip: INVERNESS, FL 34453

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: VIRGINIA S. NOTHNAGEL

VS

03/23/2009

Electronic Signature of Signing Officer or Director

_____ Date