

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L44795

FILED  
Jan 23, 2004  
Secretary of State

Entity Name: CHUCK STEVENSON, O.D., P.A.

**Current Principal Place of Business:**

770 HIGHWAY 331 SOUTH  
SUITE 1  
DEFUNIAK SPRINGS, FL 32433 US

**New Principal Place of Business:**

**Current Mailing Address:**

770 HIGHWAY 331 SOUTH  
SUITE 1  
DEFUNIAK SPRINGS, FL 32433 US

**New Mailing Address:**

FEI Number: 58-1874214      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

STEVENSON, CHARLES G III  
770 HIGHWAY 331 S  
SUITE 1  
DEFUNIAK SPRINGS, FL 32433 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: P ( ) Delete  
Name: STEVENSON, III C  
Address: 770 HIGHWAY, 331 SOUTH SUITE 1  
City-St-Zip: DEFUNIAK SPRINGS, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: STEVENSON III, CHARLES G  
Address: 770 HIGHWAY, 331 SOUTH SUITE 1  
City-St-Zip: DEFUNIAK SPRINGS, FL

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHARLES G. STEVENSON III

P

01/23/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date