

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000108169

FILED
Jan 28, 2008
Secretary of State

Entity Name: CENTRAL FLORIDA FOOT CARE, P.A.

Current Principal Place of Business:

701 N PALMETTO ST
D
LEESBURG, FL 34748

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 491334
LEESBURG, FL 34749

New Mailing Address:

FEI Number: 22-3878283 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, JAMES DAVID ESQ.
9030 W.FORT ISLAND TRAIL #5
CRYSTAL RIVER, FL 34429 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: MGR () Delete
Name: PRZYSTAWSKI, NICHOLAS
Address: 33300 TEWKSBURY DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: MGR () Delete
Name: PRZYSTAWSKI, SUZANNE L
Address: 33300 TEWKSBURY DRIVE
City-St-Zip: LEESBURG, FL 34788

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: NICHOLAS PRZYSTAWSKI

MGR

01/28/2008

Electronic Signature of Signing Officer or Director

Date