

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078940

FILED
Apr 16, 2009
Secretary of State

Entity Name: CAMILLE A. NOLTON, O.D., P.A.

Current Principal Place of Business:

7171 N. DAVIS HIGHWAY
1059
PENSACOLA, FL 32504

New Principal Place of Business:

5100 N 9TH AVENUE
E503A
PENSACOLA, FL 32504

Current Mailing Address:

7171 N DAVIS HIGHWAY
1059
PENSACOLA, FL 32504

New Mailing Address:

5100 N 9TH AVENUE
E503A
PENSACOLA, FL 32504

FEI Number: 20-0097501

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOLTON, CAMILLE A
7171 N DAVIS HIGHWAY
PENSACOLA, FL 32504 US

Name and Address of New Registered Agent:

NOLTON, CAMILLE A O.D.
5100 N 9TH AVENUE
E503A
PENSACOLA, FL 32504 US

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: CAMILLE A NOLTON, OD

04/16/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NOLTON, CAMILLE A
Address: 7171 N DAVIS HWY
City-St-Zip: PENSACOLA, FL 32504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NOLTON, CAMILLE A O.D.
Address: 5100 N 9TH AVENUE, STE E503A
City-St-Zip: PENSACOLA, FL 32504

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: CAMILLE A NOLTON, OD

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date