2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000051235

Entity Name: CATHERINE FIEDLER O.D., P.A.

FILED Jul 06, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

22040 PALMS WAY #205 5550 GLADES RD BOCA RATON, FL 33433 SUITE 400

BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

22040 PALMS WAY #205 169 MULBERRY GROVE RD BOCA RATON, FL 33433 ROYAL PALM BEACH, FL 33411

FEI Number: 75-3150404 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FIEDLER, CATHERINE FIEDLER, CATHERINE M DR
22040 PALMS WAY #205 169 MULBERRY GROVE RD
BOCA RATON, FL 33433 US ROYAL PALM BEACH, FL 33411 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: CATHERINE M. FIEDLER OD PA 07/06/2005

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

D () Delete Title: DR (X) Change () Addition

Name:FIEDLER, CATHERINEName:FIEDLER, CATHERINEAddress:22040 PALMS WAY #205Address:169 MULBERRY GROVE RDCity-St-Zip:BOCA RATON, FL 33433City-St-Zip:ROYAL PALM BEACH, FL 33411

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: CATHERINE M. FIEDLER OD PA DR 07/06/2005