## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060239

Entity Name: NICOLE A. GOLDING, O.D., P.A.

FILED May 07, 2006 Secretary of State

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

134 IVENUCI LOOP 134 IVERNIA LOOP

TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312

Current Mailing Address: New Mailing Address:

134 IVENUCI LOOP 134 IVERNIA LOOP

TALLAHASSEE, FL 32312 TALLAHASSEE, FL 32312

FEI Number: 20-0990677 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:

KING, KIMBERLY L 215 SOUTH MONROE ST., 2ND FLOOR TALLAHASSEE, FL 32301 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:

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GOLDING, NICOLE A
 Name:
 GOLDING, NICOLE A

 Address:
 134 IVENUIA LOOP
 Address:
 134 IVERNIA LOOP

 City-St-Zip:
 TALLAHASSEE, FL 32312
 City-St-Zip:
 TALLAHASSEE, FL 32312

I hereby certify that the information supplied with this filing does not qualify for the 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: NICOLE GOLDING PRES 05/07/2006