

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000157949

FILED
May 01, 2010
Secretary of State

Entity Name: TIMOTHY U. KETTERSON, PH.D., P.A.

Current Principal Place of Business:

4965 SW 91ST TERRACE
SUITE A, HAILE VILLAGE CENTER
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

4965 SW 91ST TERRACE
SUITE A, HAILE VILLAGE CENTER
GAINESVILLE, FL 32608 US

New Mailing Address:

FEI Number: 20-3951730

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KETTERSON, TIMOTHY U JR.
4965 SW 91ST TERRACE
SUITE A, HAILE VILLAGE CENTER
GAINESVILLE, FL 32608 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

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: DIR
Name: KETTERSON, TIMOTHY U JR
Address: 4965 SW 91ST TERRACE, SUITE A
City-St-Zip: GAINESVILLE, FL 32608 US

Title: OFF
Name: ROMAN, DULCE M
Address: 6810 SW 80TH DRIVE
City-St-Zip: GAINESVILLE, FL 32608 US

I hereby 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 all other like empowered.

SIGNATURE: TIMOTHY KETTERSON

DIR

05/01/2010

Electronic Signature of Signing Officer or Director

Date