2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# P06000125020

Entity Name: NILSA RIVERA, PH.D., P.A.

Current Principal Place of Business:

692 GOODLETTE RD NORTH
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

PO BOX 770760
NAPLES, FL 34107

New Mailing Address:

P.O.BOX 9168
NAPLES, FL 34101

FEI Number: 22-3944013 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIVERA, NILSA PSTD
692 GOODLETTE ROAD NORTH
NAPLES, FL 34102 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: PSTD ( ) Delete
Name: RIVERA, NILSA
Address: 3435 10TH STREET NORTH, SUITE 303
City-St-Zip: NAPLES, FL 34103

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: RIVERA, NILSA
Address: 692 GOODLETTE RD
City-St-Zip: NAPLES, FL 34102

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: NILSA RIVERA, PH.D. PSDT 02/02/2009

Electronic Signature of Signing Officer or Director Date