

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 19, 2008 8:00 am
Secretary of State

02-19-2008 90029 039 ***150.00

DOCUMENT # P07000120874 1. Entity Name CARL C CARTER OD PA			
Principal Place of Business 19 FAIRWAY DRIVE BOYNTON BEACH FL 33436		Mailing Address 19 FAIRWAY DRIVE BOYNTON BEACH FL 33436	
2. Principal Place of Business, No P.O. Box # 10201 Wagon Ranch		3. Mailing Address 	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State Boynton Bch FL		City & State 	
Zip 33436		Zip 	
Country USA		Country 	
4. FEI Number 261330125		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CARTER, CARL C 19 FAIRWAY DRIVE BOYNTON BEACH FL 33436		7. Name and Address of New Registered Agent 	
Name 		Name 	
Street Address (P.O. Box Number is Not Acceptable) 		Street Address (P.O. Box Number is Not Acceptable) 	
City 		City 	
State FL		State 	
Zip Code 		Zip Code 	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Carl C Carter</i></u> DATE <u><i>2/4/08</i></u> Signature, typed or printed name of registered agent and title (if applicable). (NOTE: Registered Agent signature required when reappointing)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	P/D CARTER, CARL C 19 FAIRWAY DRIVE BOYNTON BEACH FL 33436 ☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Carl C Carter</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		<u><i>2/9/08 (321) 7401632</i></u> DATE	

ATTACHMENT

66004400
07000120874

EIN Individual Request - Online Application

Page 1 of 1



EIN Assistant

Congratulations! Your EIN has been successfully assigned.

EIN Assigned: 26-1330125

Legal Name: CARL C CARTER OD PA

IMPORTANT:

Save and/or print this page and the confirmation letter below for your permanent records. You will NOT be able to return to this page once you exit the application.

This confirmation letter is your official IRS notice and contains important information regarding your EIN.

— Your EIN Confirmation Letter

Once you have saved or printed your letter, click "Continue" to get additional information about using your new EIN.

Continue >>

5. EIN Confirmation

Help Topics

What if I do not have access to a printer at this time?

Can I access this letter at a later date?