2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 15, 2009
Secretary of State

DOCUMENT# P08000008765

Entity Name: DOC ANDERSON INC

Current Principal Place of Business:

15 NW 27TH TERRACE
FT LAUDERDALE, FL 33311 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 121951
FT LAUDERDALE, FL 33312 US

New Mailing Address:

FEI Number: 26-1830113 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CAPE COD MGMT SVC INC
314 NE 27TH STREET
WILTON MANORS, FL 33334 US

Name and Address of New Registered Agent:

ANDERSON, ADOLPHUS
15 NW 27TH TER
FT LAUDERDALE, FL 33311 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: ADOLPHUS ANDERSON 09/15/2009
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: P ( ) Delete
Name: ANDERSON, ADOLPHUS
Address: 15 NW 27 TERRACE
City-St-Zip: FT LAUDERDALE, FL 33311 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ADOLPHUS ANDERSON P 09/15/2009
Electronic Signature of Signing Officer or Director Date