

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000013557

FILED  
Feb 26, 2010  
Secretary of State

**Entity Name:** ASSOCIATED OPTOMETRISTS OF OVERHOLSER & OVERHOLSER, O.D., P.A.

**Current Principal Place of Business:**

5353 SW COLLEGE RD  
OCALA, FL 34474 US

**New Principal Place of Business:**

**Current Mailing Address:**  
3600 SW 54TH CT  
OCALA, FL 34474 US

**New Mailing Address:**

FEI Number: 59-3168173      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

OVERHOLSER, RAY  
3600 SW 54TH CT  
OCALA, FL 34474 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: MGR  
Name: OVERHOLSER, RAY  
Address: 3600 SW 54TH CT  
City-St-Zip: OCALA, FL 34474 US

Title: MGR  
Name: OVERHOLSER, TERRIE  
Address: 3600 SW 54TH CT  
City-St-Zip: OCALA, FL 34474 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: RAY OVERHOLSER

MGR

02/26/2010

Electronic Signature of Signing Officer or Director

Date