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Feb 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000070650 (4)

1. Corporation Name
ANTHONY J. GUADAGNO, O.D., P.A.



Principal Place of Business
27001 US 19 NORTH
SUITE 2004
CLEARWATER F 34621
US

Mailing Address
27001 U S19 NORTH
SUITE 2004
CLEARWATER FL 34621-3410
US

3. Date Incorporated or Qualified
09/26/1994

3a. Date of Last Report
03/18/1996

2. Principal Place of Business
21 6123 STATE RD 54
Suite, Apt. #, etc.
22
City & State
23 NEW PORT RICHEY, FL
Zip
24 34653
Country
25 USA

2a. Mailing Address
26 6123 STATE RD 54
Suite, Apt. #, etc.
27
City & State
28 NEW PORT RICHEY, FL
Zip
29 34653
Country
30 USA

4. FEI Number
59-3269812

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
GUADAGNO, ANTHONY J
27001 US 19 N.
SUITE 2004
CLEARWATER FL 34621

10. Name and Address of New Registered Agent
81 Name
ANTHONY J. GUADAGNO, O.D.
82 Street Address (P.O. Box Number is Not Acceptable)
6123 STATE RD 54
83
84 City
NEW PORT RICHEY FL 85 Zip Code
34653

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE 1/29/97

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	GUADAGNO, ANTHONY J	
STREET ADDRESS	27001 US 19 NORTH SUITE 2004	
CITY-ST-ZIP	CLEARWATER FL	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	Change	Addition
1.2 NAME	ANTHONY J. GUADAGNO, O.D.		
1.3 STREET ADDRESS	6123 STATE RD 54		
1.4 CITY-ST-ZIP	NEW PORT RICHEY FL 34653		
2.1 TITLE		Change	Addition
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP			
3.1 TITLE		Change	Addition
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* DATE 1/29/97 813-938-6719

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)