2008 FOR PROFIT CORPORATION

FILED Jan 14, 2008 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P95000096784 SHERRIE D. TEDDY, O.D., P.A. Principal Place of Business Mailing Address 2740 SEVEN SPRINGS BLVD 2740 SEVEN SPRINGS BLVD NEW PORT RICHEY, FL 34655 NEW PORT RICHEY, FL 34655 US 01082008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0638249 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent TEDDY, SHERRIE D DO NOT WRITE 2740 SEVEN SPRINGS BLVD NEW PORT RICHEY, FL 34655 IN THIS SPACE 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PD TITLE TEDDY, SHERRIE D NAME 2740 SEVEN SPRINGS BLVD STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL STD TITLE BACHMAN, GREGG NAME 2740 SEVEN SPRINGS BLVD STREET ADDRESS CITY-ST-ZIP NEW PORT RICHEY, FL TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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: SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPED OR PRINTED NAME OF