2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED DOCUMENT # P98000027690 Jul 14, 2008 08:00 AM 1. Entity Name WALTER F. RUTKOWSKY, O.D., P.A. **Secretary of State** Principal Place of Business Mailing Address 5005 MANATEE AVENUE WEST 5005 MANATEE AVENUE WEST BRADENTON, FL 34209 BRADENTON, FL 34209 07092008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0835836 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RUTKOWSKY, WALTER 5005 MANATEE AVENUE WEST BRADENTON, FL 34209 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) DATÉ 20834 HOJA FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 12, 2008 OFFICERS AND DIRECTORS 10. TITLE U00000954596 RUTKOWSKY, WALTER F NAME STREET ADDRESS 702 PALMA SOLA BLVD CITY-ST-ZIP BRADENTON, FL 34209 TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing 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 Sat SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR DAILS DAI

CITY-ST-ZIP