

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S19447

FILED  
Jan 09, 2011  
Secretary of State

**Entity Name:** CATHERINE M. FORD, O.D., P.A.

**Current Principal Place of Business:**

1183 OLD DIXIE HWY  
STE A  
LAKE PARK, FL 33403

**New Principal Place of Business:**

**Current Mailing Address:**

1183 OLD DIXIE HWY  
STE A  
LAKE PARK, FL 33403

**New Mailing Address:**

**FEI Number:** 65-0229568

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FORD, CATHERINE M.  
1183 OLD DIXIE HWY  
STE A  
LAKE PARK, FL 33403 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FORD, CATHERINE M.  
Address: 2059 CEZANNE RD  
City-St-Zip: WEST PALM BEACH, FL 33409

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: CATHERINE M. FORD, OD

PRES

01/09/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date