

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S27644

FILED
Mar 08, 2007
Secretary of State

Entity Name: CHARLES S. MILES, O.D., P.A.

Current Principal Place of Business:

4255 US 1 SOUTH
STE 2
ST AUGUSTINE, FL 32086 US

New Principal Place of Business:

25 DELTONA BLVD
SUITE 1
ST AUGUSTINE, FL 32086 US

Current Mailing Address:

4255 US 1 SOUTH
STE 2
ST AUGUSTINE, FL 32086 US

New Mailing Address:

25 DELTONA BLVD
SUITE 1
ST AUGUSTINE, FL 32086 US

FEI Number: 59-3050287

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MILES, CHARLES S.
4255 US 1 SOUTH
STE 2
ST AUGUSTINE, FL 32086 US

Name and Address of New Registered Agent:

MILES, CHARLES S.
25 DELTONA BLVD
SUITE 1
ST AUGUSTINE, FL 32086 US

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:

03/08/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MILES, CHARLES S.,
Address: 141 CREEK SIDE DR
City-St-Zip: ST AUGUSTINE, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MILES, CHARLES S.,
Address: 141 CREEK SIDE DR
City-St-Zip: ST AUGUSTINE, FL 32086 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CHARLES S MILES

P

03/08/2007

Electronic Signature of Signing Officer or Director

Date