

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000000262

FILED
Jan 09, 2011
Secretary of State

Entity Name: NORTHEAST FLORIDA OPTOMETRIC SOCIETY, INC

Current Principal Place of Business:

8081 PHILIPS HIGHWAY
9
JACKSONVILLE, FL 32256

New Principal Place of Business:

3948 3RD STREET SOUTH
#41
JACKSONVILLE BEACH, FL 32250

Current Mailing Address:

3948 3RD STREET SOUTH
#41
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 80-0527910 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HUNTER & ASSOCIATES, PA
4201 BAYMEADOWS RD
4
JACKSONVILLE, FL 32217 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: P
Name: PULLEN, STEPHEN
Address: 11808-1 SAN JOSE BLVD
City-St-Zip: JACKSONVILLE, FL 32223 US

Title: VP
Name: OWEN, JULIE
Address: 118 NW GRAY GLEN
City-St-Zip: LAKE CITY, FL 32055 US

Title: T
Name: ARMITAGE, BRIAN
Address: 8081 PHILIPS HIGHWAY STE 9
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: S
Name: BROWN, JEFF
Address: 2255 DUNN AVE STE 101B
City-St-Zip: JACKSONVILLE, FL 32218

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN ARMITAGE

T

01/09/2011

Electronic Signature of Signing Officer or Director

Date