FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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	OD, INC.				
incipal Place o	of Business	Mailing Address			
1100 NORTH LITTLE ROCK	UNIVERSITY. STE ONE	1100 NORTH UNIVERS			
Direct noon	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			3. Date hicorporated or Qualhed	Date of Last Report
Principal Plac	ce of Business	28. Mailing Address		4. Fet Number	Applied For
		26		71-0709896	Not Applicable
Suite, Apt. #.	etc	Suite, Apt. #, etc.		5. Gertificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Ony a Orace		28		Trust Fund Contribution	Added to Fees
Ziρ	Country	Zip	Country	8. This corporation has liability for intan	
	25	29	30	Florida Statutes Yes T 10. Name and Address of New Regis	
	9. Name and Address of Curren	Hegistered Agent	B1 Name	TO. Name and Address of New Pegis	stered Agent
0.7.00	RPORATION SYSTEM				
	OUTH PINE ISLAND ROAD		62 Street Add	ress (P.O. Box Number is Not Acceptable)	
	TION FL 33324		83		
	7,017 1 2 4002 1		84 City		85 Zip Code
			'		FL
or registere	d agent, or both, in the State of Florid	la. Such change was authorize	ed by the corporation's Loc	ication submits this statement for the purpos and of directors. Thereby accept the appoint	ie of changing its registered of ment as registered agent. I an i
familiar with	n, and accept the obligations of, Secti	on 607.0505, Florida Statutes).		
GNATURE _	Signal ire: systed or printed native of registered ages?	surrendam Tuesa. 1800	SE Registered Agent signaturi, regis i	will when remaitation?	DA'E
2.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
ίξ	PCD	☐ DELETE	1 / TI/UF		☐ Change ☐ Addition
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			1.2 NAME		
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SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR