

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 603508

FILED  
Jan 14, 2009  
Secretary of State

Entity Name: EYE ASSOCIATES OF BOCA RATON, P.A.

**Current Principal Place of Business:**

950 N.W 13TH STREET  
BOCA RATON, FL 334862310

**New Principal Place of Business:**

**Current Mailing Address:**

950 N.W 13TH STREET  
BOCA RATON, FL 334862310

**New Mailing Address:**

FEI Number: 59-1403353      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GOLDMAN, HOWARD  
950 NW 13TH STREET  
BOCA RATON, FL 33286      US

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

GOLDMAN, HOWARD  
950 NW 13TH STREET  
BOCA RATON, FL 33486      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: HOWARD GOLDMAN

01/14/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D      ( ) Delete  
Name: KOHL, DOUGLAS  
Address: 950 NW 13ST  
City-St-Zip: BOCA RATON, FL 33486 PB

Title: D      ( ) Delete  
Name: GOLDMAN, HOWARD B  
Address: 950 NW 13ST  
City-St-Zip: BOCA RATON, FL 33486 PB

Title: D      ( ) Delete  
Name: PERLMAN, JEFFREY  
Address: 950 NW 13ST  
City-St-Zip: BOCA RATON, FL 33486 PB

Title: D      ( ) Delete  
Name: WEINER, MARK H  
Address: 950 NW 13ST  
City-St-Zip: BOCA RATON, FL 33486 PB

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: HOWARD GOLDMAN

PRES

01/14/2009

Electronic Signature of Signing Officer or Director

Date