2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: NATIONAL OPTHALMIC RESEARCH INSTITUTE, L.L.C.

Current Principal Place of Business:

6901 INTERNATIONAL CENTER BLVD
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

PO BOX 60559
FORT MYERS, FL 339066559

New Mailing Address:

FEI Number: 59-2086792 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

WALKER, JOSEPH P M.D.
6901 INTERNATIONAL CENTER BLVD
FORT MYERS, FL 33912 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RETINA CONSULTANTS OF SW FLORIDA, P.A.
Address: 6901 INTERNATIONAL CENTER BLVD
City-St-Zip: FORT MYERS, FL 33912

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: JOSEPH P. WALKER DR. 01/04/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date