

**2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F55028

**Entity Name:** COMMUNITY EYE CENTER, P.A.

**Current Principal Place of Business:**

21275 OLEAN BLVD.  
PORT CHARLOTTE, FL 33952

**Current Mailing Address:**

FARR LAW FIRM  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 US

**FEI Number:** 59-2136412

**Certificate of Status Desired:** No

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

HOLMES, DAVID A  
FARR LAW FIRM  
99 NESBIT STREET  
PUNTA GORDA, FL 33950 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title D, PRESIDENT  
Name SPADAFORA, JOSEPH  
Address 21275 OLEAN BLVD  
City-State-Zip: PORT CHARLOTTE FL

Title D, SECRETARY  
Name SCHAIBLE, ERIC  
Address 21275 OLEAN BLVD  
City-State-Zip: PORT CHARLOTTE FL 33952

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

**SIGNATURE:** JOSEPH SPADAFORA

**PRESIDENT**

**02/14/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date