

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000068034

Entity Name: VISION 21 MANAGED EYE CARE OF TAMPA BAY, INC.**Current Principal Place of Business:**939 ELKRIDGE LANDING ROAD
SUITE 200
LINTHICUM, MD 21090**Current Mailing Address:**939 ELKRIDGE LANDING ROAD
SUITE 200
LINTHICUM, MD 21090**FEI Number:** 59-3203060**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 SENIOR VICE PRESIDENT,
SECRETARY
Name WEINSTEIN, AUDREY M
Address 7700 CONGRESS AVE, SUITE 3108
City-State-Zip: BOCA RATON FL 33487

Title DIRECTOR, CEO
Name ROTHROCK, KIRK E
Address 939 ELKRIDGE LANDING ROAD
SUITE 200
City-State-Zip: LINTHICUM MD 21090

Title SENIOR VICE PRESIDENT
Name HESS, KIMBERLEY D
Address 11101 WHITE ROCK ROAD
#150
City-State-Zip: RANCHO CORDOVA CA 95670

Title DIRECTOR
Name KABAR, MATTHEW STEPHEN
Address 375 PARK AVENUE, 12TH FLOOR
City-State-Zip: NEW YORK NY 10152

Title DIRECTOR
Name CROSBY, CHRISTOPHER J
Address 50 KENNEDY PLAZA
12TH FLOOR
City-State-Zip: PROVIDENCE RI 02903

Title SENIOR VICE PRESIDENT
Name LUCAS, STEPHANIE J
Address 325 COLUMBIA TURNPIKE
SUITE 303
City-State-Zip: FLORHAM PARK NJ 07932

Title TREASURER, CFO
Name SILVERBERG, BRIAN D
Address 939 ELKRIDGE LANDING ROAD
SUITE 200
City-State-Zip: LINTHICUM MD 21090

Title DIRECTOR
Name MICHAEL, BOXER E
Address 375 PARK AVENUE, 12TH FLOOR
City-State-Zip: NEW YORK NY 10152

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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: AUDREY WEINSTEIN**SVP AND SECRETARY****04/28/2016**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	OSNOSS, DANIEL ROBERT
Address	375 PARK AVENUE, 12TH FLOOR
City-State-Zip:	NEW YORK NY 10152