

2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000046541

Entity Name: ADVANCED EYE CARE OF CENTRAL FLORIDA, INC.

Current Principal Place of Business:

5680 WAYSIDE DRIVE
SANFORD, FL 32771

Current Mailing Address:

5680 WAYSIDE DRIVE
SANFORD, FL 32771

FEI Number: 59-3514555

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LARSON, BEN L DR.
5680 WAYSIDE DRIVE
SANFORD, FL 32771 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: BEN L. LARSON

01/29/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P	Title	V
Name	LARSON, BEN	Name	LARSON, CHRISTY
Address	5265 VISTA CLUB RUN	Address	5265 VISTA CLUB RUN
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SANFORD FL 32771

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: BEN LARSON

CEO

01/29/2016

Electronic Signature of Signing Officer/Director Detail

Date