

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000177403

**Entity Name:** EAGLE VISION EYE SERVICES, LLC

**Current Principal Place of Business:**

965 PARNELL CT  
DELTONA, FL 32738

**Current Mailing Address:**

965 PARNELL CT  
DELTONA, FL 32738 US

**FEI Number:** 82-2532102

**Certificate of Status Desired:** No

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

NAZARIO, CALVIN  
965 PARNELL CT  
DELTONA, FL 32738 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

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	NAZARIO, CALVIN	Name	NAZARIO, ALBA
Address	965 PARNELL CT	Address	965 PARNELL CT
City-State-Zip:	DELTONA FL 32738	City-State-Zip:	DELTONA FL 32738

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CALVIN NAZARIO

**MANAGER**

**04/22/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date