

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 604606

FILED
Jan 06, 2006
Secretary of State

Entity Name: MONTGOMERY EYE CENTER, INC.

Current Principal Place of Business:

700 NEAPOLITAN WAY
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

700 NEAPOLITAN WAY
NAPLES, FL 34103 US

New Mailing Address:

FEI Number: 59-1480588

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTGOMERY, CHARLES J MD
700 NEAPOLITAN WAY
NAPLES, FL 34103 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MONTGOMERY, CHARLES J MD
Address: 700 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL

Title: TD () Delete
Name: MONTGOMERY, JAY E
Address: 2094 MISSION DRIVE
City-St-Zip: NAPLES, FL

Title: SD () Delete
Name: MONTGOMERY, MARK T
Address: 2229 REGAL WAY
City-St-Zip: NAPLES, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MONTGOMERY, CHARLES J MD
Address: 700 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: TD (X) Change () Addition
Name: MONTGOMERY, JAY E
Address: 700 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

Title: SD (X) Change () Addition
Name: MONTGOMERY, MARK T
Address: 700 NEAPOLITAN WAY
City-St-Zip: NAPLES, FL 34103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAY MONTGOMERY

TD

01/06/2006

Electronic Signature of Signing Officer or Director

Date