2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
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Secretary of State

DOCUMENT# F00000003976

Entity Name: LASER VISION CENTERS, INC.

Current Principal Place of Business:

16305 SWINGLEY RIDGE RD.
STE. 300
CHESTERFIELD, MO 63017

New Principal Place of Business:

Current Mailing Address:

16305 SWINGLEY RIDGE RD.
STE. 300
CHESTERFIELD, MO 63017

New Mailing Address:

FEI Number: 43-1530063 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CEOD
Name: TIFFANY, JAMES B
Address: 16305 SWINGLEY RIDGE RD. , #300
City-St-Zip: CHESTERFIELD, MO 63017

Title: SD
Name: ROGERS, JAMES F
Address: 16305 SWINGLEY RIDGE RD. , #300
City-St-Zip: CHESTERFIELD, MO 63017

Title: T
Name: FRAZIER, JANE
Address: 16305 SWINGLEY RIDGE RD. , #300
City-St-Zip: CHESTERFIELD, MO 63017

Title: AS
Name: ANDERSON, CHARICE Y
Address: 16305 SWINGLEY RIDGE RD, STE 300
City-St-Zip: CHESTERFIELD, MO 63017

Title: AT
Name: COMPTON, JONATHAN
Address: 16305 SWINGLEY RIDGE RD, STE 300
City-St-Zip: CHESTERFIELD, MO 63017

Title: D
Name: FLYNN, PETER E
Address: 16305 SWINGLEY RIDGE RD, STE 300
City-St-Zip: CHESTERFIELD, MO 63017

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: JAMES F ROGERS S 04/07/2011

Electronic Signature of Signing Officer or Director Date