2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2005
Secretary of State

DOCUMENT# F04000000431

Entity Name: THE SOCIETY FOR EXCELLENCE IN EYECARE, INC.

Current Principal Place of Business:

2856 ALLAPATTAH DRIVE
CLEARWATER, FL 33761

New Principal Place of Business:

Current Mailing Address:

2856 ALLAPATTAH DRIVE
CLEARWATER, FL 33761

New Mailing Address:

FEI Number: 59-2966585 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROARK, TRENT
2856 ALLAPATTAH DRIVE
CLEARWATER, FL 33761 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:	P	( ) Delete
Name:	KREMER, FREDERIC B	
Address:	601 S. HENDERSON RD #250	
City-St-Zip:	KING OF PRUSSIA, PA 19406	
Title:	V	( ) Delete
Name:	JOHN, MAURICE E	
Address:	1305 WALL STREET, SUITE 200	
City-St-Zip:	JEFFERSONVILLE, IN 47130	
Title:	S	( ) Delete
Name:	GLASER, BERT M	
Address:	901 DELANEY VALLEY	
City-St-Zip:	TOWSON, MD 21204	
Title:	T	( ) Delete
Name:	FREEMAN, JERRE M	
Address:	6485 POPLAR AVE	
City-St-Zip:	MEMPHIS, TN 38119	
Title:	C	( ) Delete
Name:	MARTIN, ROBERT G	
Address:	2170 MIDLAND ROAD	
City-St-Zip:	SOUTHERN PINES, NC 28387	
Title:	D	( ) Delete
Name:	KEARNEY, JOHN R	
Address:	135 COUNTY HWY 128	
City-St-Zip:	JOHNSTOWN, NY 12095	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FREDERIC KREMER P 02/13/2005

Electronic Signature of Signing Officer or Director — Date