

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F75363

1. Entity Name
FAMILY EYE CARE, P.A.



Principal Place of Business
1840 DUNN AVENUE
JACKSONVILLE, FL 32218 US

Mailing Address
1840 DUNN AVENUE
JACKSONVILLE, FL 32218 US

FILED
Sep 03, 2008 08:00 AM
Secretary of State



07092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2207509

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

AKEL, DANIEL D ESQ
ONE INDEPENDENT DRIVE, SUITE 2301
JACKSONVILLE, FL 32202

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 12, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CAPERTON, BRUCE M
STREET ADDRESS 1840 DUNN AVENUE, 4
CITY-ST-ZIP JACKSONVILLE, FL 32218

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0000000958810
09/03/08-80004-004 550.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Bruce M. Caperton

Bruce M. Caperton

7/9/08
Date

904 751-4483
Daytime Phone #