

2012 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F75363

FILED
Mar 05, 2012
Secretary of State

Entity Name: FAMILY EYE CARE, P.A.

Current Principal Place of Business:

1840 DUNN AVENUE
#4
JACKSONVILLE, FL 32218 US

New Principal Place of Business:

Current Mailing Address:

1840 DUNN AVENUE
#4
JACKSONVILLE, FL 32218 US

New Mailing Address:

FEI Number: 59-2207509

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: CAPERTON, BRUCE M
Address: 1840 DUNN AVENUE, 4
City-St-Zip: JACKSONVILLE, FL 32218 US

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: BRUCE M CAPERTON

PD

03/05/2012

Electronic Signature of Signing Officer or Director

Date