2000 UNIFORM BUSINESS REPORT (UBR)

FILED Aug 02, 2000 8:00 am Secretary of State DOCUMENT # F95000005244 AMERICAN OPHTHALMIC OF DOTHAN, INC. 08-02-2000 90125 028 ***550.00 Principal Place of Business Mailing Address 14800 LANDMARK 14800 LANDMARK STE 500 STE 500 TUU/U043 DALLAS TX 75240 DALLAS TX 75240-7013 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 63-1122214 Not Applicable Country Zip Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NRAI SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 526 E. PARK AVE. TALLAHASSEE FL 32301 Zip Code FL 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition TITLE ☐ Delete YEARY, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 14800 LANDMARK STE 500 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75240 TITLE Change ☐ Addition x Delete TITLE NAME BOND, JONATHAN NAME STREET ADDRESS STREET ADDRESS 14800 LANDMARK STE 500 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75240 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME NICOLAOU, KAREN STREET ADDRESS STREET ADDRESS 5005 RIVERWAY DR STE 400 CITY-ST-ZIP CITY-ST-ZIP **HOUSTON TX 77056** ☐ Addition ☐ Change TIT: F AS ☐ Delete TITLE NAME EDENBURN, LANE NAME STREET ADDRESS STREET ADDRESS 14800 LANDMARK STE 500 CITY-ST-ZIP CITY-ST-ZIP DALLAS TX 75240 ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with this filing does not qualify 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 frue 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE: SIGNATURE PROTECTION OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

T-115-00

(972) 892-7200

Daytime Phone #