2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 01, 2006
Secretary of State

DOCUMENT# L01000019009

Entity Name: EXCELLENCE IN VISION CARE, LLC

Current Principal Place of Business:

1050 US HWY 27 #1
CLERMONT, FL 34711

New Principal Place of Business:

1050 US HWY 27
SUITE 1
CLERMONT, FL 34711

Current Mailing Address:

1050 US HWY 27 #1
CLERMONT, FL 34711

New Mailing Address:

1050 US HWY 27
SUITE 1
CLERMONT, FL 34711

FEI Number: 59-3755522 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HAFNER, TERRANCE W OD
1050 US HWY 27 #1
CLERMONT, FL 34711 US

Name and Address of New Registered Agent:

HAFNER, TERRANCE W OD
1050 US HWY 27
SUITE 1
CLERMONT, FL 34711 US

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: _____ 05/01/2006
Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: HAFNER, TERRANCE W
Address: 1050 US HWY 27 #1
City-St-Zip: CLERMONT, FL 34711

ADDITIONS/CHANGES:

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 Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TERRANCE W HAFNER MGR 05/01/2006
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date