

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000019160

Entity Name: ALLIED EYECARE, LLC

FILED  
Feb 22, 2007  
Secretary of State

## Current Principal Place of Business:

13575 58TH ST N  
2020  
CLEARWATER, FL 33760

## Current Mailing Address:

13575 58TH ST N  
2020  
CLEARWATER, FL 33760

## New Principal Place of Business:

19321-C US HIGHWAY 19 N  
SUITE 320  
CLEARWATER, FL 33764

## New Mailing Address:

19321-C US HIGHWAY 19 N  
320  
CLEARWATER, FL 33764

FEI Number: 59-3744453

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FORD, HARVEY A P.A.  
C/O FORD & FORD, P.A.  
575 SECOND AVENUE SOUTH, #201  
ST. PETERSBURG, FL 33701 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

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SANCHEZ HOLDINGS, IN, C.  
Address: 13575 58TH ST N STE 2020  
City-St-Zip: CLEARWATER, FL 33760

Title: MGRM (X) Delete  
Name: PRICE, JOSEPH V MR  
Address: 13575 58TH STREET N, SUITE 2020  
City-St-Zip: CLEARWATER, FL 33760

Title: MGRM (X) Delete  
Name: SANCHEZ, RICHARD L MR  
Address: 13575 58TH STREET N, SUITE 2020  
City-St-Zip: CLEARWATER, FL 33760

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: RISAN HOLDINGS, INC., DBA SANCHEZ H O LDINGS  
Address: 19321-C US HIGHWAY 19 N, SUITE 320  
City-St-Zip: CLEARWATER, FL 33764

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 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: JOELLEN WOOTEN

CONT

02/22/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date