

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 09, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000000474

1. Entity Name

EYE ASSOCIATES HOLDINGS, LLC



Principal Place of Business

4007 BAYSIDE DRIVE
BRADENTON, FL 34210

Mailing Address

4007 BAYSIDE DRIVE
BRADENTON, FL 34210



02112007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

74-3079089

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

SILVERMAN, MICHELINE
4007 BAYSIDE DRIVE
BRADENTON, FL 34210

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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 _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE AS
NAME SILVERMAN, HARRIS
STREET ADDRESS 4007 BAYSIDE DRIVE
CITY-ST-ZIP BRADENTON, FL 34210

TITLE AS
NAME SILVERMAN, MICHELINE
STREET ADDRESS 4007 BAYSIDE DRIVE
CITY-ST-ZIP BRADENTON, FL 34210

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03/20/07-80015-019 50.00

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IN THIS SPACE**

11. 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 is true and accurate and that my 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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

2/17/07 941-7567704