

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000009341

FILED
May 19, 2011
Secretary of State

Entity Name: EYE CARE OF PERDIDO, LLC

Current Principal Place of Business:

12385 SORRENTO ROAD
SUITE C3
PENSACOLA, FL 32507 US

New Principal Place of Business:

12591 SORRENTO ROAD
SUITE B
PENSACOLA, FL 32507 US

Current Mailing Address:

5101 NORTH DAVIS PARKWAY
PENSACOLA, FL 32503 US

New Mailing Address:

FEI Number: 20-2363671

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LYNCHARD LAW FIRM, P.A.
1901 ANDORRA STREET
NAVARRE, FL 32566 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
Name: SPEAR, CARL
Address: 5101 NORTH DAVIS PARKWAY
City-St-Zip: PENSACOLA, FL 32503 US

Title: MGRM
Name: SPEAR, KATIE
Address: 5101 NORTH DAVIS PARKWAY
City-St-Zip: PENSACOLA, FL 32503 US

I hereby 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: CARL H SPEAR

MGMR

05/19/2011

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