

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000066461

FILED
Apr 30, 2008
Secretary of State

Entity Name: HAINES VISION CENTER, LLC

Current Principal Place of Business:

7211 US HIGHWAY 19 NORTH
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

7211 US HIGHWAY 19 NORTH
PINELLAS PARK, FL 33871

New Mailing Address:

FEI Number: 20-3104347

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANSIS, FRANK A
7211 US HIGHWAY 19 NORTH
PINELLAS PARK, FL 33781 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: HAINES, VICTORIA V O.D.
Address: 7211 US HIGHWAY 19 NORTH
City-St-Zip: PINELLAS PARK, FL 33781

Title: MGRM () Delete
Name: MANSIS, FRANK A
Address: 7211 US HIGHWAY 19 NORTH
City-St-Zip: PINELLAS PARK, FL 33781

ADDITIONS/CHANGES:

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 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: FRANK A. MANSIS

MGRM

04/30/2008

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