2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000066461

Address:

City-St-Zip:

Entity Name: HAINES VISION CENTER, LLC

7211 US HIGHWAY 19 NORTH

PINELLAS PARK, FL 33781

FILED May 07, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 7211 US HIGHWAY 19 NORTH PINELLAS PARK, FL 33781 **Current Mailing Address: New Mailing Address:** 7211 US HIGHWAY 19 NORTH 7211 US HIGHWAY 19 NORTH PINELLAS PARK, FL 33871 PINELLAS PARK, FL 33781 FEI Number: 20-3104347 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: Name and Address of New Registered Agent: MANSIS, FRANK A 7211 US HIGHWAY 19 NORTH PINELLAS PARK, FL 33781 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: ADDITIONS/CHANGES: MGRM () Delete Title: () Change () Addition HAINES, VICTORIA V O.D. Name: Name: Address: 7211 US HIGHWAY 19 NORTH Address: City-St-Zip: PINELLAS PARK, FL 33781 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MANSIS, FRANK A 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 MGMR 05/07/2009