

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000054378

FILED
Jan 12, 2008
Secretary of State

Entity Name: SUNSHINE EYECARE ALLIANCE, LLC

Current Principal Place of Business:

12548 LAKE UNDERHILL ROAD
ORLANDO, FL 32828

New Principal Place of Business:

Current Mailing Address:

12548 LAKE UNDERHILL ROAD
ORLANDO, FL 32828

New Mailing Address:

FEI Number: 20-5001537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BORGES, JENNIFER O.D.
12548 LAKE UNDERHILL ROAD
ORLANDO, FL 32828 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: MGR () Delete
Name: LESAGE, ROBERT O.D.
Address: 15620A MCGREGOR BLVD.
City-St-Zip: FT. MYERS, FL 33901

Title: MGR () Delete
Name: FIDLER, CRAIG O.D.
Address: 1300 S.E. 17TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33316

Title: MGR () Delete
Name: YAGER, JACK O.D.
Address: 214 MARKS STREET
City-St-Zip: ORLANDO, FL 32803

Title: MGR () Delete
Name: KOSANOVICH, TAD O.D.
Address: 150 SOUTH INDIANA AVE.
City-St-Zip: ENGELWOOD, FL 34223

Title: MGR () Delete
Name: MINT, JANET O.D.
Address: 4131 SOUTHSIDE BLVD., STE. #203
City-St-Zip: JACKSONVILLE, FL 32216

Title: MGR () Delete
Name: KAUFMAN, SANDY
Address: 9804 S. MILITARY TRAIL, STE. E-7
City-St-Zip: BOYNTON BEACH, FL 33436

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JENNIFER BORGES

MGR

01/12/2008

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