

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000032505

Entity Name: EXPRESS EYE CARE, LLC

FILED
Feb 29, 2008
Secretary of State

Current Principal Place of Business:

5100 WEST LEMON STREET, STE #109
TAMPA, FL 33609

New Principal Place of Business:

Current Mailing Address:

5100 WEST LEMON STREET, STE #109
TAMPA, FL 33609

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHIDDEN, STACEY
5100 WEST LEMON STREET, STE #109
TAMPA, FL 33609 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: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: WHIDDEN, STACEY L
Address: 5100 W. LEMON STREET, STE. 109
City-St-Zip: TAMPA, FL 33609

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: STACEY WHIDDEN

MGR

02/29/2008

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