

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000105842

Entity Name: FAMILY EYECARE CENTER, LLC

FILED
Apr 28, 2008
Secretary of State

Current Principal Place of Business:

21178 OLEAN BLVD.
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

21178 OLEAN BLVD.
PORT CHARLOTTE, FL 33952

New Mailing Address:

FEI Number: 22-3970742

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CZTZ, CRAIG
21178 OLEAN BLVD STE A
PORT CHARLOTTE, FL 33952 US

Name and Address of New Registered Agent:

CZYZ, CRAIG
21178 OLEAN BLVD
SUITE A
PORT CHARLOTTE, FL 33952 US

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: CRAIG CZYZ

04/28/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: CZYZ, CRAIG N
Address: 21178 OLEAN BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33952

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: CRAIG CZYZ

MGR

04/28/2008

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