2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 01, 2011
Secretary of State

DOCUMENT# L07000105842

Entity Name: FAMILY EYECARE CENTER, LLC

Current Principal Place of Business:

21178 OLEAN BLVD.
UNIT A
PORT CHARLOTTE, FL 33952

New Principal Place of Business:

Current Mailing Address:

21178 OLEAN BLVD.
UNIT A
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:

CZYZ, CRAIG
21178 OLEAN BLVD
UNIT A
PORT CHARLOTTE, FL 33952 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
Name: CZYZ, CRAIG N
Address: 21178 OLEAN BLVD.
City-St-Zip: PORT CHARLOTTE, FL 33952

I hereby 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 Statues.

SIGNATURE: CRAIG CZYZ MGRM 02/01/2011

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