2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000126061

Entity Name: NATIONAL PRESCRIPTION FACILITATOR, LLC

FILED Apr 14, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O NVA NATIONAL VISION ADMINISTRATORS 1200 ROUTE 46, SUITE 200

CLIFTON, NJ 07013

3902 MILLENIA BOULEVARD

ORLANDO, FL 32839

Current Mailing Address: New Mailing Address:

C/O NVA NATIONAL VISION ADMINISTRATORS 1200 ROUTE 46, SUITE 200 CLIFTON, NJ 07013

FEI Number: 26-1615884 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

() Delete Title: () Change () Addition

ULLMAN, RICHARD O MGR Name: Name: Address: 9912 LAKE LOUISE DRIVE Address: City-St-Zip: WINDERMERE, FL 34786 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: RICHARD O ULLMAN 04/14/2009