

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000029594

FILED
Apr 18, 2012
Secretary of State

Entity Name: EYE PHYSICIANS OF CENTRAL FLORIDA, P.L.C.

Current Principal Place of Business:

790 CONCOURSE PKWY
STE 200 A
MAITLAND, FL 32751 US

New Principal Place of Business:

Current Mailing Address:

790 CONCOURSE PKWY
STE 200 A
MAITLAND, FL 32751 US

New Mailing Address:

FEI Number: 26-2258314

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GOLD, ROBERT G
790 CONCOURSE PKWY
STE 200 A
MAITLAND, FL 32751 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
Name: GOLD, ROBERT S M.D.
Address: 790 CONCOURSE PKWY STE 200 A
City-St-Zip: MAITLAND, FL 32751 US

Title: MGR
Name: AUERBACH, DAVID D.O.
Address: 790 CONCOURSE PKWY STE 200 A
City-St-Zip: MAITLAND, FL 32751 US

Title: MGR
Name: BLUMENFELD, LOUIS M.D.
Address: 790 CONCOURSE PKWY STE 200 A
City-St-Zip: MAITLAND, FL 32751 US

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 Statutes.

SIGNATURE: ROBERT GOLD

MGR

04/18/2012

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