

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000116285

FILED
Feb 18, 2010
Secretary of State

Entity Name: GLAUCOMA DIAGNOSTIC LABORATORY, LLC

Current Principal Place of Business:

1301 1ST STREET SOUTH #707
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

11512 LAKE MEAD AVENUE
#534
JACKSONVILLE, FL 32256

Current Mailing Address:

1301 1ST STREET SOUTH #707
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

11512 LAKE MEAD AVENUE
JACKSONVILLE, FL 32256

FEI Number: 26-3971858

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHETTY, RAJESH MD
1301 1ST STREET SOUTH #707
JACKSONVILLE BEACH, FL 32250 US

Name and Address of New Registered Agent:

SHETTY, RAJESH MD
11512 LAKE MEAD AVENUE
#534
JACKSONVILLE, FL 32256 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: RAJESH SHETTY

02/18/2010

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: DR.
Name: SHETTY, RAJESH K MANAGER
Address: 11512 LAKE MEAD AVENUE #534
City-St-Zip: JACKSONVILLE, FL 32256 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: RAJESH SHETTY

DR.

02/18/2010

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