2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2010
Secretary of State

DOCUMENT# L09000093003

Entity Name: SURE VISION EYE CARE, LLC

Current Principal Place of Business:

1187 JOHN SIMS PARKWAY
NICEVILLE, FL 32578

New Principal Place of Business:

Current Mailing Address:

1187 JOHN SIMS PARKWAY
NICEVILLE, FL 32578

New Mailing Address:

FEI Number: 27-0998675 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AVERY, JAMIE
909 MAR WALT DR.
FORT WALTON BEACH, FL 32547 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: LASHLEY, AMANDA
Address: 1187 JOHN SIMS PARKWAY
City-St-Zip: NICEVILLE, FL 32578

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: AMANDA LASHLEY DR. 01/14/2010

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