

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L41611

FILED  
Apr 14, 2010  
Secretary of State

**Entity Name:** EYE DOCTORS OPTICAL OUTLET OF BRADENTON, P.A.

**Current Principal Place of Business:**

5607 JOHNS ROAD  
TAMPA, FL 33634 US

**New Principal Place of Business:**

**Current Mailing Address:**

5607 JOHNS ROAD  
TAMPA, FL 33634 US

**New Mailing Address:**

**FEI Number:** 65-0163481

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BIBLE, ROBERT W. JR.  
4600 WEST CYPRESS STREET  
SUITE 500  
TAMPA, FL 33607 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** LEWENSON, ROBERT  
**Address:** 5607 JOHNS ROAD  
**City-St-Zip:** TAMPA, FL

**Title:** D  
**Name:** WEISBOND, STEVEN  
**Address:** 12910 LAZY PINE PLACE  
**City-St-Zip:** TAMPA, FL 33624

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** ROBERT LEWENSON

D

04/14/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date