

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000513

FILED
Apr 28, 2006
Secretary of State

Entity Name: EYE CARE 4 KIDS CHILDREN'S FOUNDATION, INC.

Current Principal Place of Business:

371 TELFORD COURT
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

371 TELFORD COURT
SPRING HILL, FL 34606

New Mailing Address:

FEI Number: 83-0347554

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARONE, SCOTT
371 TELFORD COURT
SPRING HILL, FL 34606 US

Name and Address of New Registered Agent:

BARONE, G. SCOTT
371 TELFORD COURT
SPRING HILL, FL 34606 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: G SCOTT BARONE

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BARONE, SCOTT
Address: 371 TELFORD COURT
City-St-Zip: SPRING HILL, FL 34606

Title: STD () Delete
Name: BARONE, KAREN M
Address: 371 TELFORD COURT
City-St-Zip: SPRING HILL, FL 34606

Title: VD () Delete
Name: BARONE, GARY
Address: 371 TELFORD COURT
City-St-Zip: SPRING HILL, FL 34606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BARONE, G. SCOTT
Address: 371 TELFORD COURT
City-St-Zip: SPRING HILL, FL 34606

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: BARONE, GARY A
Address: 371 TELFORD COURT
City-St-Zip: SPRING HILL, FL 34606

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: G SCOTT BARONE

PD

04/28/2006

Electronic Signature of Signing Officer or Director

Date