## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P0000000947

Entity Name: FAMILY VISION SERVICES, P.A.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

901 US HWY 27 NORTH 10150 BLOOMINGDALE AVENUE C/O SEARS OPTICAL C/O TARGET OPTICAL

SEBRING, FL 33870 C/O TARGET OF TICAL
SEBRING, FL 33870 RIVERVIEW, FL 33578

Current Mailing Address: New Mailing Address:

12718 BRAMFIELD DRIVE RIVERVIEW, FL 33569 12718 BRAMFIELD DRIVE RIVERVIEW, FL 33579

FEI Number: 59-3628702 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

MATSUKADO, IRIS

12718 BRAMFIELD DRIVE
RIVERVIEW, FL 33569 US

MATSUKADO, IRIS
12718 BRAMFIELD DRIVE
RIVERVIEW, FL 33579 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: IRIS MATSUKADO 01/04/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPTS () Delete Title: DPTS (X) Change () Addition Name: MATSUKADO, IRIS Name: MATSUKADO, IRIS

Address: 12718 BRAMFIELD DRIVE
City-St-Zip: RIVERVIEW, FL 33569

Address: 12718 BRAMFIELD DRIVE
City-St-Zip: RIVERVIEW, FL 33579

Title: VP () Delete Title: VP (X) Change () Addition
Name: CASTLEWITZ, DAVID JR
Address: 12718 BRAMFIELD DRIVE Address: 12718 BRAMFIELD DRIVE

Address: 12718 BRAMFIELD DRIVE Address: 12718 BRAMFIELD DRIVE City-St-Zip: RIVERVIEW, FL 33569 City-St-Zip: RIVERVIEW, FL 33579

I hereby certify that the information supplied with this filing does not qualify 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IRIS MATSUKADO P 01/04/2008