2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000014524

Entity Name: ULTIMATE EYE CARE P.A.

FILED Apr 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 700 NORTH RIVER RD. VENICE, FL 34293 **Current Mailing Address: New Mailing Address:** 700 NORTH RIVER RD. VENICE, FL 34293 FEI Number: 65-0979977 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: THOMPSON, SHERRY THOMPSON, SHERRY 700 N RIVER ROAD 1076 LEMON BAY DRIVE VENICE, FL 34293 US VENICE, FL 34293 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: 04/19/2005 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PVD () Delete Title: () Change () Addition THOMPSON, KEITH M Name: Name: 700 N RIVER RD. Address: Address: City-St-Zip: VENICE, FL 34293 City-St-Zip: () Delete Title: STD Title: () Change () Addition THOMPSON, SHERRY Name: Name: 700 N RIVER RD. Address: Address: VENICE, FL 34293 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHERRY THOMPSON SEC 04/19/2005