2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# P01000111034

Entity Name: VISIONCARE OF SOUTH FLORIDA, INC.

Current Principal Place of Business:

542 E WOOLBRIGHT RD
BOYNTON BCH, FL 33435

New Principal Place of Business:

540 E WOOLBRIGHT RD
BOYNTON BCH, FL 33435

Current Mailing Address:

542 E WOOLBRIGHT RD
BOYNTON BCH, FL 33435

New Mailing Address:

540 E WOOLBRIGHT RD
BOYNTON BCH, FL 33435

FEI Number: 80-0012868 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FRANKEL, BARRY A
542 E. WOOLBRIGHT RD.
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

FRANKEL, BARRY A
540 E. WOOLBRIGHT RD.
BOYNTON BEACH, FL 33435 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: BARRY FRANKEL 04/13/2009
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: FRANKEL, BARRY A
Address: 8001 WEST LAKE DR
City-St-Zip: LAKE CLARKE SHORES, FL 33406

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: BARRY FRANKEL P 04/13/2009
Electronic Signature of Signing Officer or Director Date