2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000155534

Entity Name: STERLING VISION OF FORT MYERS, INC.

FILED Mar 30, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
100 QUENTIN ROOSEVELT BLVD STE 508 GARDEN CITY, NY 11530					
Current Mailing Address:			New Mailing Address:		
	TIN ROOSEVE BITY, NY 11530	LT BLVD STE 508)			
FEI Number: 2	20-8478830	FEI Number Applied For () FEI N	lumber Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:	
BLUMBERGEXCELSIOR CORPORATE SERVICES, INC. 515 EAST PARK AVENUE TALLAHASSEE, FL 32301 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:					
	Electroni	Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	COHEN, ALAN O	DOSEVELT BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	COHEN, ROBER	DOSEVELT BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GOLD, JOEL	Delete DOSEVELT BLVD E 508	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SIEGEL, SEYMO	DOSEVELT BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ROSS, HARVEY	Delete DOSEVELT BLVD E 508	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	PAYAN, CHRÌST	DOSEVELT BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: BRIAN ALESSI CFO 03/30/2009