

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021984

FILED  
Apr 13, 2009  
Secretary of State

Entity Name: EYE & EAR OF PALM SPRINGS, INC.

## Current Principal Place of Business:

1692 S. CONGRESS AVENUE  
PALM SPRINGS, FL 33461

## New Principal Place of Business:

## Current Mailing Address:

542 E WOOLBRIGHT RD  
BOYNTON BEACH, FL 33435

## New Mailing Address:

540 E WOOLBRIGHT RD  
BOYNTON BEACH, FL 33435

FEI Number: 20-2317743

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

FRANKEL, BARRY  
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 DRIVE  
City-St-Zip: LAKE CLARKE SHORES, FL 33406

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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