2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000032938

Entity Name: EYES ON THE GREEN, P.A.

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

10550 FOREST HILL BLVD SUITE C-4

WELLINGTON, FL 33414

Current Mailing Address: New Mailing Address:

7433 PRESCOTT LANE 10550 FOREST HILL BOULEVARD WELLINGTON, FL 33414

FEI Number: 20-4445698 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:

SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US NASON, CAROL HECKER O.D. 7433 PRESCOTT LANE LAKE WORTH, FL 33467 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: CAROL HECKER NASON, O.D. 01/08/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD () Delete Title: PSTD (X) Change () Addition
Name: NASON, CAROL HECKER O.D. Name: SILVERSTONE, STEVEN L O.D.
Address: 10550 FOREST HILL BLVD SUITE C-4 Address: 10550 FOREST HILL BLVD SUITE C-4

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: VP () Delete Title: VP (X) Change () Addition Name: NASON, MICHAEL S O.D. Name: NASON, CAROL HECKER O.D.

Address: 10550 FOREST HILL BLVD SUITE C-4 Address: 10550 FOREST HILL BLVD SUITE C-4

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

Title: VP () Delete Title: VP (X) Change () Addition Name: SILVERSTONE, STEVEN L O.D. Name: NASON, MICHAEL S O.D.

Address: 10550 FOREST HILL BLVD SUITE C-4 Address: 10550 FOREST HILL BLVD SUITE C-4

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: WELLINGTON, FL 33414

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROL HECKER NASON, O.D. VP 01/08/2007