

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000017704

FILED
Sep 06, 2010
Secretary of State

Entity Name: 3 D VISION EYE SURGERY CENTER PA

Current Principal Place of Business:

2800 N ATLANTIC AVE #216
DAYTONA BEACH, FL 32118

New Principal Place of Business:

1893 N CLYDE MORRIS BLVD
SUITE 100
DAYTONA BEACH, FL 32117

Current Mailing Address:

2800 N ATLANTIC AVE #216
DAYTONA BEACH, FL 32118

New Mailing Address:

1893 N CLYDE MORRIS BLVD
SUITE 100
DAYTONA BEACH, FL 32117

FEI Number: 32-0275956

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JACKSON, ALLEN MD
2800 N ATLANTIC AVE #216
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

JACKSON, ALLEN MD
1893 N CLYDE MORRIS BLVD
SUITE 100
DAYTONA BEACH, FL 32117 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:

09/06/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: JACKSON, ALLEN MD
Address: 1893 N CLYDE MORRIS BLVD. SUITE 100
City-St-Zip: DAYTONA BEACH, FL 32117

I hereby 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 all other like empowered.

SIGNATURE: ALLEN JACKSON

P

09/06/2010

Electronic Signature of Signing Officer or Director

Date