## 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000017704

Entity Name: 3 D VISION EYE SURGERY CENTER PA

FILED Jan 06, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

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

Current Mailing Address: 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: Name and Address of New Registered Agent:

JACKSON, ALLEN MD

1893 N CLYDE MORRIS BLVD

SUITE 100

DAYTONA BEACH, FL 32117 US

JACKSON, ALLEN P

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: ALLEN JACKSON 01/06/2012

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

Name: JACKSON, ALLEN MD
Address: 3315 S ATLANTIC AVE APT 607
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VP

Name: FIORELLI, VANESSA MD
Address: 3315 S ATLANTIC AVE APT 607
City-St-Zip: DAYTONA BEACH, FL 32118

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: VANESSA FIORELLI VP 01/06/2012