2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000036741

Entity Name: NELSON EYE CENTER OPTOMETRISTS, INC.

FILED Apr 25, 2011 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

16528 N DALE MABRY HWY TAMPA, FL 33618

Current Mailing Address: New Mailing Address:

16528 N DALE MABRY HWY TAMPA, FL 33618

FEI Number: 59-3314171 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:

SANDERS, WALTER S 16528 N DALE MABRY HWY TAMPA, FL 33618 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES

Name: KRYM, ROBERT

Address: 16528 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618 US

Title: S/T

Name: KRYM, PATRICIA

Address: 16528 N DALE MABRY HWY
City-St-Zip: TAMPA, FL 33618 US

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: ROBERT KRYM PRES 04/25/2011