

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000052676

FILED
Jan 10, 2005
Secretary of State

Entity Name: NAPLES EYE ASSOCIATES, P.A.

Current Principal Place of Business:

431 BAYFRONT PLACE
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

431 BAYFRONT PLACE
NAPLES, FL 34102

New Mailing Address:

FEI Number: 65-0683027

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRONIN, DENNIS P ESQ
BOND, SCHOENECK & KING, P.A.
1167 THIRD STREET SOUTH #107
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

BOBER, CARLTON A ESQ
VERNIS & BOWLING OF BROWARD, P.A.
1901 SOUTH ANDREWS AVENUE
FT. LAUDERDALE, FL 33316 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: CARLTON A. BOBER, ESQ.

01/10/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SILVERMAN, RICHARD A M.D.
Address: 2154 ARBOUR WALK CIRCLE , #2526
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: RODNITE, JUDITH A
Address: 2154 ARBOR WALK CICLE #2526
City-St-Zip: NAPLES, FL 34109

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 for the exemption stated in Section 119.07(3)(i), 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: RICHARD A. SILVERMAN, M.D.

D

01/10/2005

Electronic Signature of Signing Officer or Director

Date