

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000028067

FILED  
Apr 12, 2010  
Secretary of State

Entity Name: EYE CENTER OF NORTH FLORIDA, P.A.

## Current Principal Place of Business:

2500 MLK JR BLVD  
PANAMA CITY, FL 32405

## New Principal Place of Business:

## Current Mailing Address:

2500 MLK JR BLVD  
PANAMA CITY, FL 32405

## New Mailing Address:

FEI Number: 52-2107690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J  
427 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D  
Name: FISHER, BRET L  
Address: 2500 HWY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: AKER, ANTHONY L O.D.  
Address: 2500 HWY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: EDINGER, DAVID J O.D.  
Address: 2500 HWY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: MALLARY, JOHN J  
Address: 2500 HIGHWAY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: JONES, MARK S OD  
Address: 2500 HWY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: GARLAND, PAUL E  
Address: 2500 MLK JR BLVD  
City-St-Zip: PANAMA CITY, FL 32405

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: ANTHONY L AKER

PRES

04/12/2010

Electronic Signature of Signing Officer or Director

Date

07/09/2010 15:18 Eye Center

(FAX)850 522 9829

P.002/002

*Dean over*

**2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000028067

Entity Name: EYE CENTER OF NORTH FLORIDA, P.A.

880-245-6017  
FILED  
Apr 12, 2010  
Secretary of State  
Attachment For  
7th Officer

Current Principal Place of Business:

2500 MLK JR BLVD  
PANAMA CITY, FL 32405

New Principal Place of Business:

Current Mailing Address:

2500 MLK JR BLVD  
PANAMA CITY, FL 32405

New Mailing Address:

FEI Number: 52-2107690

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

Name and Address of Current Registered Agent:

SLOAN, TIMOTHY J  
427 MCKENZIE AVENUE  
PANAMA CITY, FL 32401 US

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Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( )

**OFFICERS AND DIRECTORS:**

Title: D  
Name: FISHER, BRET L  
Address: 2500 HWY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
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Title: D  
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Title: D  
Name: JONES, MARK S OD  
Address: 2500 HWY 77  
City-St-Zip: PANAMA CITY, FL 32405

Title: D  
Name: GARLAND, PAUL E  
Address: 2500 MLK JR BLVD  
City-St-Zip: PANAMA CITY, FL 32405

*Need to Add:*  
*D*  
*Dyne, Jeffrey R.*  
*2500 Hwy 77*  
*Panama City FL 32405*

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: ANTHONY LAKER

PRES

04/12/2010

Electronic Signature of Signing Officer or Director

Date