

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000105276

FILED
Apr 07, 2011
Secretary of State

Entity Name: CENTRAL FLORIDA CATARACT & LASER SURGERY CENTER, INC.

Current Principal Place of Business:

801 N. STONE ST
STE B
DELAND, FL 32720

New Principal Place of Business:

Current Mailing Address:

801 N. STONE ST
STE B
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-3549152

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYNES, MICHAEL L
801 N. STONE ST
STE B
DELAND, FL 32720 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

OFFICERS AND DIRECTORS:

Title: PSTD
Name: HAYNES, MICHAEL L
Address: 4848 S PENINSULA DR
City-St-Zip: PONCE INLET, FL 32127

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: MICHAEL L HAYNES

PSTD

04/07/2011

Electronic Signature of Signing Officer or Director

Date