

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000002243

FILED
Apr 20, 2005
Secretary of State

Entity Name: EYE ASSOCIATES OF SOUTHWEST FLORIDA, M.D., P.A.

Current Principal Place of Business:

7955 AIRPORT PULLING ROAD NORTH
SUITE 104
NAPLES, FL 34109

New Principal Place of Business:

Current Mailing Address:

7955 AIRPORT PULLING ROAD NORTH
SUITE 104
NAPLES, FL 34109

New Mailing Address:

4225 EVANS AVENUE
FORT MYERS, FL 33901

FEI Number: 65-0886142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, BRUCE D
12800 UNIVERSITY DRIVE
SUITE 600
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

IHNS, RICHARD
4225 EVANS AVENUE
FORT MYERS, FL 33901 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: RICHARD IHNS

04/20/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: IHNS, RICHARD
Address: 1447 TREDEGAR DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: SMITH, STEPHEN E M.D.
Address: 4225 EVANS AVENUE
City-St-Zip: FORT MYERS, FL 33901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: IHNS, RICHARD
Address: 1447 TREDEGAR DRIVE
City-St-Zip: FORT MYERS, FL 33919

Title: P (X) Change () Addition
Name: SMITH, STEPHEN E M.D.
Address: 4225 EVANS AVENUE
City-St-Zip: FORT MYERS, FL 33901

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 IHNS

VP

04/20/2005

Electronic Signature of Signing Officer or Director

Date