2011 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2011
Secretary of State

DOCUMENT# P99000031898

Entity Name: AFTER-IMAGE EYE CARE, P.A.

Current Principal Place of Business:

2601 FOREST ROAD
SPRING HILL, FL 34606

New Principal Place of Business:

Current Mailing Address:

6169 SCHALEKAMP DR
SPRING HILL, FL 34609

New Mailing Address:

2601 FOREST ROAD
SPRING HILL, FL 34606

FEI Number: 59-3569033 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

NOWELL, TODD D OD
2601 FOREST ROAD
SPRING HILL, FL 34606 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: DR
Name: NOWELL, TODD D
Address: 6169 SCHALEKAMP DR
City-St-Zip: SPRING HILL, FL 34609

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: TODD D. NOWELL DR. 01/07/2011

Electronic Signature of Signing Officer or Director Date