2016 FLORIDA PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# G67810

Entity Name: SUNCOAST EYE CENTER, P.A.

Littly Name: Solvoods Lite Center, F./

Current Principal Place of Business:

14003 LAKESHORE BLVD HUDSON, FL 34667

Current Mailing Address:

14003 LAKESHORE BLVD HUDSON, FL 34667 US

FEI Number: 59-2337219 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NORMAN, CHRISTOPHER H ESQ. 315 S. HYDE PARK AVENUE TAMPA, FL 33606 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: CHRISTOPHER H. NORMAN, ESQ. 06/01/2016

Electronic Signature of Registered Agent

Date

FILED Jun 01, 2016

Secretary of State

CC7741889211

Officer/Director Detail:

Title DIRECTOR, PRESIDENT,

SECRETARY, TREASURER

Name FREEDMAN, ALAN M.

Address 14003 LAKESHORE BLVD.

City-State-Zip: HUDSON FL 34667

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: ALAN M. FREEDMAN, M.D.

Electronic Signature of Signing Officer/Director Detail

DIRECTOR

06/01/2016

Date