DOCUMENT# H71218

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

Entity Name: EVA KAREN BOSWELL, OPTOMETRIST, O.D., PROFESSIONAL ASSOCIATION

Current Principal Place of Business:

645 LEMON AVE LAKE ALFRED, FL 33850

Current Mailing Address:

645 LEMON AVE LAKE ALFRED, FL 33850 US

FEI Number: 59-2569525

Name and Address of Current Registered Agent:

BOSWELL, EVA KAREN 645 LEMON AVE LAKE ALFRED, FL 33850 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

TitlePRESNameBOSWELL, E. KARENAddress645 LEMON AVECity-State-Zip:LAKE ALFRED FL 33850

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.

OWNER

Electronic Signature of Signing Officer/Director Detail

FILED Feb 19, 2015 Secretary of State CC6463143282

Certificate of Status Desired: No

Date

02/19/2015 Date