## 2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000074697

Entity Name: ATLANTIC EYE INSTITUTE, P.A.

**Current Principal Place of Business:** 

3316 THIRD STREET SOUTH SUITE 103

JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:** 

152 UNIVERSITY BLVD. NORTH JACKSONVILLE, FL 32211

FEI Number: 59-3662455 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHMUNES, PATRICIA S 152 UNIVERSITY BLVD., NORTH JACKSONVILLE, FL 32211 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

Date

FILED Feb 05, 2014

**Secretary of State** 

CC9631471547

Officer/Director Detail:

Title D Title D

Name SHMUNES, NEIL T Name DUSS, CHARLES V

Address 152 UNIVERSITY BLVD. NORTH Address 152 UNIVERSITY BLVD. NORTH

City-State-Zip: JACKSONVILLE FL 32211 City-State-Zip: JACKSONVILLE FL 32211

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.

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: NEIL T. SHMUNES

DIRECTOR

02/05/2014