# 2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000048215

Entity Name: TRINITY FAMILY EYECARE, P.A.

# **Current Principal Place of Business:**

10710 S.R. 54 SUITE 107 TRINITY, FL 34655

### **Current Mailing Address:**

10710 S.R. 54 SUITE 107 TRINITY, FL 34655 US

# FEI Number: 27-2809330

### Name and Address of Current Registered Agent:

CHURCH, LESLIE A DR. 3516 EAST LAKE DRIVE LAND O LAKES, FL 34639 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: DR. LESLIE CHURCH

Electronic Signature of Registered Agent

### Officer/Director Detail :

TitleP,DNameCHURCH, LESLIEAddress3516 EAST LAKE DRIVECity-State-Zip:LAND O LAKES FL 34639

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: DR. LESLIE CHURCH

OWNER/PRESIDENT

02/18/2017

Date

Electronic Signature of Signing Officer/Director Detail

FILED Feb 18, 2017 Secretary of State CC1795060927

Certificate of Status Desired: Yes

02/18/2017

Date