2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 26, 2018
Secretary of State
CC4614318418

DOCUMENT# P14000044664

Entity Name: SHALIMAR EYE CARE PA

Current Principal Place of Business:

10 OLD FERRY ROAD
SHALIMAR, FL 32579

Current Mailing Address:

207 N MAIN STREET
CRESTVIEW, FL 32536 US

FEI Number: 46-5754503

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BATSON, WANDA
207 N MAIN STREET
CRESTVIEW, FL 32536 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

Officer/Director Detail :

Title	PST
Name	BATSON, WANDA
Address	207 N MAIN STREET
City-State-Zip:	CRESTVIEW FL 32536

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: WANDA BATSON PST 02/26/2018

Electronic Signature of Signing Officer/Director Detail — Date