

2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21000097522

Entity Name: EYECARE PHYSICIANS OF FLORIDA, P.A.

Current Principal Place of Business:

1911 N. MILLS AVENUE
ORLANDO, FL 32803

Current Mailing Address:

555 WINDERLEY PLACE
400
MAITLAND, FL 32751 US

FEI Number: 87-3693728

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 PD
Name LEHR, JOHN T M.D.
Address 1911 N. MILLS AVENUE
City-State-Zip: ORLANDO FL 32803

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: JOHN LEHR

PD

03/02/2023

Electronic Signature of Signing Officer/Director Detail

Date