

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000111387

Entity Name: ST. LUCY'S EYE INSTITUTE OF KISSIMMEE LLC

Current Principal Place of Business:

810 N ROSE AVE
KISSIMMEE, FL 34741

Current Mailing Address:

2106 N ORANGE AVE
STE 100
ORLANDO, FL 32804 US

FEI Number: 81-2878576

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLEIN, JOHN
2106 N ORANGE AVE
STE 100
ORLANDO, FL 32804 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

Authorized Person(s) Detail :

| | | | |
|-----------------|--------------------|-----------------|------------------------------|
| Title | MGR | Title | MANAGING MEMBER |
| Name | LIVECCHI, JOHN T | Name | CANNON, JEFFREY G |
| Address | 810 N ROSE AVE | Address | 2106 N ORANGE AVE STE 100 |
| City-State-Zip: | KISSIMMEE FL 34741 | City-State-Zip: | ORLANDO FL 32804 |

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY G CANNON

MGR

03/15/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date