

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000289362

Entity Name: ROBSON EYE INSTITUTE, PLLC

Current Principal Place of Business:

601 S. BELCHER ROAD
CLEARWATER, FL 33764

Current Mailing Address:

555 WINDERLEY PLACE
400
MAITLAND, FL 32751 US

FEI Number: 84-3757102

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

Authorized Person(s) Detail :

Title AMBR
Name MAGRUDER EYE INSTITUTE, PLLC
Address 1911 N MILLS AVE
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 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: JOHN LEHR

PD

02/08/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date