

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L99000005870

Entity Name: TAMPA EYE LASER CENTER, LLC

Current Principal Place of Business:

4303 N GOMEZ SUITE 100
TAMPA, FL 33607

Current Mailing Address:

4303 N GOMEZ SUITE 100
TAMPA, FL 33607 US

FEI Number: 59-3601101

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REYNOLDS, WILLIAM DMD
3000 WEST DR. M.L. KING, JR. BLVD.
TAMPA, FL 33607 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
Name REYNOLDS, WILLIAM D
Address 3000 WEST DR. M.L. KING, JR. BLVD.
City-State-Zip: TAMPA FL 33607

Title MGR
Name LEACH, DAVID H
Address 3000 WEST DR. M.L. KING, JR. BLVD.
City-State-Zip: TAMPA FL 33607

Title MGR
Name LORENZEN, TIMOTHY R
Address 3000 WEST DR. M.L. KING, JR. BLVD.
City-State-Zip: TAMPA FL 33607

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: WILLIAM REYNOLDS

MANAGER

03/09/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date