



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2010

Filing Period: January 1 - March 1 • **Filing Fee:** \$50.00* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 109803		2. Name of Corporation Seacoast Eye Associates, Inc.			
3. Street Address Principal Business Office 70 Kenyon Avenue, Suite 211			City Wakefield	State RI	Zip 02879
4. Business Phone No. (401) 783-7009		5. State of Incorporation Rhode Island			
6. Brief Description of the Character of Business Conducted in Rhode Island					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Barry Wepman, MD, Vice President			Vice President Name Mark S. Deresienski, OD, Vice President		
Street Address 70 Kenyon Avenue, Suite 211			Street Address 70 Kenyon Avenue, Suite 211		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Secretary Name Barry Wepman, MD			Treasurer Name Mark S. Deresienski, OD		
Street Address 70 Kenyon Avenue, Suite 211			Street Address 70 Kenyon Avenue, Suite 211		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Barry Wepman, MD			Director Name Mark S. Deresienski, OD		
Street Address 70 Kenyon Avenue, Suite 211			Street Address 70 Kenyon Avenue, Suite 211		
City Wakefield	State RI	Zip 02879	City Wakefield	State RI	Zip 02879
Director Name None			Director Name None		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED					
10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>					
ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			Number of Shares 400	Class/Series Common	Par Value \$1.00
THIS SECTION MUST BE COMPLETED					

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2011 FEB 23 AM 11:28

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

FILED

File Date: FEB 23 2011

Check No: 02138082 11/21

BY: _____
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Barry Wepman 2/18/11
Signature Date

Barry Wepman
Print or Type Name
Vice President
Title