

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K39350

**Entity Name:** ENVOLVE VISION OF FLORIDA, INC.**Current Principal Place of Business:**7700 FORSYTH BOULEVARD  
ST. LOUIS, MO 63105**Current Mailing Address:**7700 FORSYTH BOULEVARD  
ST. LOUIS, MO 63105 US**FEI Number:** 65-0094759**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	PRESIDENT, DIRECTOR
Name	LAVELY, DAVID
Address	1151 FALLS ROAD
City-State-Zip:	ROCKY MOUNT NC 27804

Title	VICE PRESIDENT OF TAX
Name	DINKELMAN, TRICIA
Address	7700 FORSYTH BOULEVARD
City-State-Zip:	ST. LOUIS MO 63105

Title	TREASURER, DIRECTOR
Name	WINGFIELD, SCOTT
Address	1151 FALLS ROAD
City-State-Zip:	ROCKY MOUNT NC 27804

Title	SECRETARY
Name	WILLIAMS, MARLO
Address	1151 FALLS ROAD
City-State-Zip:	ROCKY MOUNT FL 27804

Title	VP, DIRECTOR
Name	GROVER, MICHAEL
Address	1151 FALLS ROAD
City-State-Zip:	ROCKY MOUNT NC 27804

*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:** TRICIA DINKELMAN

VICE PRESIDENT, TAX

04/30/2024

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date