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## COVER LETTER

TO:	New Filing So Division of C					
SUBJ	ECT:		otometric Foundation,	, Inc.		
Dear S	ir or Madam:	·				
"Certif	icate of Existenc		fit Corporation for Authorizat Standing" and check are subm lorida.			
Please	return all corres	oondence concerning this m	atter to the following:			
			Jana Kurtz Name of Person			
			Name of reison			
		American A	Academy of Optometry,	Inc.		
			Firm/Company			
		6110	Executive Boulevard			
			Suite 506			
			Address		1	
			ockville, MD 20852		TALL SECF	
		C	ity/State and Zip Code		AUG AHA	-11
		ianak@a	aoptom.org 🗸		29 SSEE	F
	E-m		future annual report notificati	ion)		Ш
For fur	ther information	concerning this matter, plea	ase call:		AM IO: 41 ESTATE FLORIDA	D
		noenbrun at of Person	( 301 ) 984-14 Area Code & Daytime Tel-	41 x3086 ephone Number		
	MAILING AD New Filing Sec Division of Cor P.O. Box 6327 Tallahassee, FL	tion porations	New Filing Se Division of Co Clifton Buildir	rporations ng e Center Circle	S:	
Enclose	ed is a check for	the following amount:				
<b>□ \$7</b> 0	0.00 Filing Fee	\$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Certificate of Certified Cop	Status &	

#### APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617,1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

(Name of corpo	ration: must include the word "INCORPORATE age as will clearly indicate that it is a corporation resent. "Company" or "Co." may not be used as	D" or "CORPOI instead of a nat	RATION" or words or ablural person or partnership	breviations of leads of if not so contains.)	ike ined
2	New York 3		43-0768182		
4	July 25, 1947 5. Date of Incorporation)		Perpetual		
(E	Date of Incorporation)	(Duration: Yea	ar corp. will cease to exist	or "perpetual"	)
ś	Not appl ucted affairs in Florida if prior to registration. See s.	icable			
(Date first cond	ucted affairs in Florida if prior to registration. See s	ections 617.1501	& 617.1502, F.S, to deter	mine penalty lia	bility.)
7.	6110 Executive Boulevard, Sui	te 506. Rock	wille, MD 20852		
•	(Principal of	fice address)			
	6440 Evention Books and Suite	- 500 DI			
	6110 Executive Boulevard, Suit	e 506, Rock	Wille, MD 20852	<u></u>	
	(======================================				
	non profit profosci	anal accorio	tion		
(Purpose(s) of a	non-profit profession non-profit profession authorized in home state or country t	o be carried out	in the state of Florida)		<del></del>
(	,		<b>.</b>	11 AUG 29 AM IO: 4 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
. Name and stre	eet address of Florida registered agent: (P.O.	Box NOT acc	eptable)	AUG PETZ	
				ASS G	
Name:	CT Corporation System			29 SSEE SSEE	LII [
				三二 至	Ö
Office Address:	1200 South Pine Island Road	W-t-			
	Dientation	rst	22224	A H	
	Plantation (City)	, Florida	33324 (Zip Code)	-	
	(5,)		(13.1p 0000)		
10. Registered	agent's acceptance:				_
lesignated in th	med as registered agent and to accept servious is application, I hereby accept the appoint in comply with the provisions of all statutes really with and accept the obligations of my pos	ient as register	red agent and agree to	act in this cap	pacity. I
	Mare D	1	Vice President and Assi	letant Secretary	
		gent's signature)			

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12	Names and	addresses	of officers	and/or o	li <del>re</del> ctors:
LZ.	ranies and	audic23c2	OF OTFICEIS	allu oi t	111001013

A. DIRECTORS	
Chairman: See attached	
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	SEC
President: See attached	AUG RET/ AHA
	SE 29
Address:	THE STATE OF STATE O
1	LORID, L
Vice President:	
Address:	•
	,
Secretary:	
Address:	
Тгеазитет:	
Address:	
NOTE: If necessary, you may attach an addendum to the application listing addition	nai officers and/or directors.
13. (Signature of Chairman, Vice Chairman, or any officer listed in number	12 of the application)
14. Lois Schoenbrun, Executive Director	
(Typed or printed name and capacity of person signing app	lication)

### Board of Directors Contact List 2011-2012

TO THE SAME IN THE CONTRACTOR OF THE ON THE SAME THE ON THE SAME TO THE SAME THE SAM				
Name	Address	Phone/Fax/Email		
Dr. Catherine Amos	EyeCare Associates	camos@webeca.com		
President	2100 Data Park Drive	Office: 205.982.5000		
	Birmingham, AL 35244	Fax: 205-982.5920		
		Cell: 205.908.2731		
Dr. Kathy Dumbleton	School of Optometry	kdumble@uwaterloo.ca		
President-Elect	University of Waterloo	Office: 519.888.4567ext.32694		
	Waterloo, ON N2L 3G1	Fax: 519.884.8769		
	Canada	Cell: 519.722.1346		
Dr. David Kirschen	428 S. Brea Boulevard	david1@kirschen.net		
Secretary/Treasurer	Brea, CA 92821	Office: 714.529.2470		
		Fax: 866.801.4739		
		Cell: 714.390.4665		
Dr. Anthony Adams	School of Optometry	aadams@berkeley.edu		
Member-at-Large	University of California- Berkeley	Office: 510.643.2493		
	409 Minor Hall, MC 2020	Fax: 510.643.5109		
	Berkeley, CA 94720-2020	Cell: 510.710.8163		
Dr. Joseph Barr	Bausch & Lomb	Joseph.t.barr@bausch.com		
Director	1400 N. Goodman St	Office: 585.338.6439		
	Rochester, NY 14609	Fax: 585.338.0811		
		Cell: 585.301.0147		
		Asst: Gina Reger		
		Gina m. reger@bausch.com		
Dr. Howard Purcell	Essilor	HPurcell@essilorUSA.com		
Director	13555 N. Stemmons Freeway	Office: 214.496.4981		
	Dallas, TX 75234	Fax: 972.241.8601		
		Cell: 904.472.6557		
Dr. Colleen Riley	Vistakon, Division of Johnson & Johnson	www.criley3@its.jnj.com		
Director	Vision Care, Inc.	Office: 904. 443.1096		
	7500 Centurion Parkway	Fax: (904) 928-5806		
	Jacksonville, FL 32256	Cell:		
		Asst: Janet K. Williams		
		jwilliam@its.jnj.com		
Dr. Joseph Sheedy	Pacific University College of Optometry	jsheedy@pacificu.edu		
Director	2043 College Way	Office: 503-352-2884		
	Forest Grove, OR 97116	<del>                                     </del>		
Ms. Lois Schoenbrun	American Academy of Optometry	LoisS@aaoptom.org		
Executive Director AAO/AOF	6110 Executive Blvd., Suite 506	Office: 240, 880,3086		
Ex-officio	Rockville, MD 20852	Fax: 301.984.4737		
a to per thought on the		Cell: 301.537.6096		
bearing and official.	the state of the s	Maria de la companya		
Dr. Mark Eger	1501 State Avenue	MarkEger@verizon.net		
AAO Liaison	Coraopolis, PA 15108-2051	Office: 412-264-8830		
		Fax: 412-269-7766		
		Cell: 412-480-7226		
STATE IN	the contract of the contract o	James Bridge Bridge Bridge Bridge Bridge		
Dr. Mark Bullimore	QLT Inc.	MarkB@aaoptom.org		
Development Director	Vancouver, BC, Canada	Cell: 614.202.0299		
	Hm: 4560 13 <sup>th</sup> St., Apt. 208			
	Bolder, CO 80304			
Ms. Tracy Kitts	The Ohio State University	TracyK@aaoptom.org		
Foundation Coordinator	College of Optometry	Office: 614.247.1975		
	338 West 10 <sup>th</sup> Ave.	Fax: 614.247.8100		
	Columbus, OH 43210	Cell: 614.284.3971		

# State of New York Department of State } ss:

I hereby certify, that the Certificate of Incorporation of AMERICAN OPTOMETRIC FOUNDATION, INC. was filed on 07/25/1947, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



SECRETARY OF STATE TALLAHASSEF FLORINA

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WITNESS my hand and the official seal of the Department of State at the City of Albany, this 02nd day of August two thousand and eleven.

First Deputy Secretary of State