

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED  
May 01, 2009  
Secretary of State

DOCUMENT# N03000006861

Entity Name: POLK VISION, INC.

## Current Principal Place of Business:

5605 US HIGHWAY 98S  
HIGHLAND CITY, FL 33846

## New Principal Place of Business:

5605 US HIGHWAY 98S  
HIGHLAND CITY, FL 33846 US

## Current Mailing Address:

P.O. BOX 1506  
HIGHLAND CITY, FL 33846

## New Mailing Address:

P.O. BOX 1506  
HIGHLAND CITY, FL 33846 US

FEI Number: 20-0141870      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

BURTON, COLLEEN  
POLK VISION  
5605 US HWY 98 S  
HIGHLAND CITY, FL 33846 US

## Name and Address of New Registered Agent:

BURTON, COLLEEN  
5605 US HWY 98 S  
HIGHLAND CITY, FL 33846 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: \_\_\_\_\_

05/01/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: ED      ( ) Delete  
Name: BURTON, COLLEEN  
Address: P. O. BOX 1506  
City-St-Zip: HIGHLAND CITY, FL 33846 US

Title: VC      ( ) Delete  
Name: CLARK, RONALD L  
Address: 500 S. FLORIDA, SUITE 800  
City-St-Zip: LAKE LAND, FL 33801

Title: VC      ( ) Delete  
Name: PRICE, CINDY  
Address: P.O. BOX 1401  
City-St-Zip: AUBURNDALE, FL 33823

Title: T      ( ) Delete  
Name: TOUCHTON, DAVID M  
Address: P.O. BOX 1076  
City-St-Zip: LAKE LAND, FL 33802

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VC      (X) Change ( ) Addition  
Name: MCPHERSON, CHARLES  
Address: 309 QUAILS PASS RUN  
City-St-Zip: WINTER HAVEN, FL 33884 US

Title: C      (X) Change ( ) Addition  
Name: PRICE, CINDY  
Address: P.O. BOX 1401  
City-St-Zip: AUBURNDALE, FL 33823 US

Title: T      (X) Change ( ) Addition  
Name: LITTLETON, GREG  
Address: P.O. BOX 3400  
City-St-Zip: LAKE WALES, FL 33859 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: COLLEEN BURTON

ED

05/01/2009

Electronic Signature of Signing Officer or Director

Date