## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 289115

(8)

SAINT LUCIE OPTICAL, INC.

Principal Place of Business

2201 S. 10TH STREET FORT PIERCE FL 34950 Mailing Address

2201 S. 10TH STREET FORT PIERCE FL 34950

## **FILED** Feb 05 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/22/1965

Suite. Apt 8, etc.    Suite. Apt 8, etc.   Suite. Apt 8, etc.	2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
City & State 20 City & State 21 City & State 22 City & State 22 City & State 23 City & State 25 City & State 26 City & State 27 Country 28 Country 29 20 Country 20 20 Country 20 20 Country 20 20 Country 20 20 20 20 20 20 20 20 30 Country 30 30 Country 30 30 30 30 30 30 30 30 30 30 30 30 30	21		26		59-1087112	Not Applicable	
City & State    City & State   City & City & State   City & City & State   City &	Suite, Apt. #, etc.		Suite, Apt. #, etc.		E Continue of Contro Business	□ \$8.75 Additional	
20 Country   Zip	22		27		5. Certificate of Status Desired	Fee Required	
28	City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
Solution	23		28		Trust Fund Contribution		
S. Name and Address of Current Registered Agent  MALLONEE, JOHN M.D. 2201 S. 10TH ST. STE. A FORT PIERCE FL 34950  88  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. at minimization, and accept the obligations of, Socion 607 0505, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am minimization and accept the obligations of, Socion 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am minimization and accept the obligations of, Socion 607 0505, Florida Statutes.  SIGNATURE  12. OFFICIENS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. MALLONEE, M.D. J. 12. NAME  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. MALLONEE, M.D. J. 15. MALLONEE,	Zip	Country	Zip	Country	8. This corporation owes or has paid	the current year Intangible	
MALLONEE, JOHN M.D. 201 S. 10TH ST. STE. A FORT PIERCE FL 34950  82 Street Address (P.O. 8xx Number is Not Acceptable)  83 Street Address (P.O. 8xx Number is Not Acceptable)  84 City FL 85 Zip Code  85 Interest Address (P.O. 8xx Number is Not Acceptable)  86 Street Address (P.O. 8xx Number is Not Acceptable)  87 Interest Address (P.O. 8xx Number is Not Acceptable)  88 Street Address (P.O. 8xx Number is Not Acceptable)  89 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Street Address (P.O. 8xx Number is Not Acceptable)  81 Interest Address (P.O. 8xx Number is Not Acceptable)  82 Street Address (P.O. 8xx Number is Not Acceptable)  83 Interest Address (P.O. 8xx Number is Not Acceptable)  84 City FL 85 Zip Code  85 Interest Address (P.O. 8xx Number is Not Acceptable)  85 Interest Address (P.O. 8xx Number is Not Acceptable)  86 Interest Address (P.O. 8xx Number is Not Acceptable)  87 Interest Address (P.O. 8xx Number is Not Acceptable)  88 Interest Address (P.O. 8xx Number is Not Acceptable)  89 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  81 Interest Address (P.O. 8xx Number is Not Acceptable)  82 Interest Address (P.O. 8xx Number is Not Acceptable)  84 Interest Address (P.O. 8xx Number is Not Acceptable)  85 Interest Address (P.O. 8xx Number is Not Acceptable)  86 Interest Address (P.O. 8xx Number is Not Acceptable)  87 Interest Address (P.O. 8xx Number is Not Acceptable)  88 Interest Address (P.O. 8xx Number is Not Acceptable)  89 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  80 Interest Address (P.O. 8xx Number is Not Acceptable)  81 Interest Address (P.O. 8xx Number is Not Acceptable)  82 Inte	24			0			
2201 S. 10TH ST. STE. A FORT PIERCE FL 34950  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floridas, Such change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent, in an accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, in an accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, in an accept the obligations of, Section 607,0505, Florida Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, in a small registered agent, in the State of Floridas Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered agent, in the State of Floridas Statutes, the above-named corporation's board of directors, I hereby accept the appointment as registered addition.  SIGNATURE  12. MAE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PARKET AGRESS  13. STRET AGRESS  13. STRET AGRESS  14. ACITY-ST-2P  11. TITLE  12. ACITY-ST-2P  11. ACITY-ST-2P  12. ACITY-ST-2P  13. ACITY-ST-2P  14. ACITY-ST-2P  15. ACITY-ST-2P  16. ACITY-ST-2P  17. ACITY-ST-2P  17. ACITY-ST-2P  17. ACITY-ST-2P  17							
STE. A FORT PIERCE FL 34950  11. Pursuant to the provisions of Sections 607 0602 and 607 1506, Rorida Stautes, the above-named corporation submits this statement for the purpose of changing is registered agent. I am familiar with, and acceptable above 0, Section 607/0506, Rorida Stautes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with, and acceptable 30 per pointment as registered agent. I am familiar with and acceptable 30 per pointment as registered agent. I am familiar with an acceptable 30 per pointment as registered agent. I am familiar with an acceptable 30 per pointment as registered agent. I am familiar with a pointment as registered agent. I am familiar with an acceptable 30 per pointment as registered 30 per pointment agent. 30 per pointment as registered 30 per pointment as registered 30 per pointment agent and section 30 per pointment agent and section 30 per pointment agent agent. 30 per pointment agent ag				81 Name			
STE. A FORT PIERCE FL 34950  83  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, to mismilar with, and accept the obligations of, Section 607.0502 for in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, to mismilar with, and accept the obligations of, Section 607.0505. Proficed Statutes.  SIGNATURE  Signavare, typed or primed name or registered agent and title if applicable.  (NOTE Registered Agent signavare required when relinative)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. In TITLE  MALLONEE, M.D. J  2201 S. 10TH STREET  1.3 STREET ADDRESS  DRITT PIERCE FL  1.4 STREET ADDRESS  CITY-ST-2P  TITLE  VP  CHANNON, CHRISTOPHER  22 NAME  2201 S. 10TH STREET  FT. PIERCE FL  2.4 CITY-ST-2P  TITLE  CHANGLEY, KENNETH  2201 S. 10TH ST. STE. A  3.3 STREET ADDRESS  CITY-ST-2P  TITLE  Change  Addition  ALE CHANGLEY, KENNETH  22 NAME  32 NAME  32 NAME  32 NAME  32 NAME  32 NAME  32 NAME  33 STREET ADDRESS  CITY-ST-2P  TITLE  Change  Addition  ALE CHANGLEY, KENNETH  22 NAME  32 NAME  33 STREET ADDRESS  CITY-ST-2P  TITLE  Change  Addition  ALE CHANGLEY, KENNETH  22 NAME  33 STREET ADDRESS  CITY-ST-2P  TITLE  Change  Addition  ALE CHANGLEY  ACTY-ST-2P  ADDITIONS/CHANGES COMPS AND DIRECTORS A				82 Street Address (P.O. Box Number is Not Acceptable)			
Ball   City   FL   85   Zip Code							
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or mit smillair with, and accept the obligations of, Section 607 050S, Florida Statutes.  SIGNATURE    Description   Descrip	FORT PIERCE FL 34950			83			
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or mit smillair with, and accept the obligations of, Section 607 050S, Florida Statutes.  SIGNATURE    Description   Descrip				04 City		[55] 7. O. I.	
SIGNATURE   Signature typed or primed name or registered agent and 816 it applicable.   (NOTE. Registered Apent signature received wheir reinstating)   DATE				64 City		FL 85 Zip Code	
SIGNATURE   Signature typed or primed name or registered agent and 816 it applicable.   (NOTE. Registered Apent signature received wheir reinstating)   DATE							
SIGNATURE   Signature typed or primed name or registered agent and 816 it applicable.   (NOTE. Registered Apent signature received wheir reinstating)   DATE	office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with and accept the obligations of Section 607 0505. Florida Statutes						
Signature, hypert or printed many of registered appear and tills of spiciabable. (NOTE, Registered Appear signature required when individually a part of the spiciabable.) (NOTE, Registered Appear signature required when individually a part of the spicial and spicial a							
TITLE	Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE						
NAME   MALLONEE, M.D. J   12 NAME   2201 S. 10TH STREET   1.3 STREET ADDRESS   1.4 CITY-ST-ZPP   CHANNON, CHRISTOPHER   22 NAME   2201 S. 10TH STREET   22 STREET ADDRESS   2201 S. 10TH STREET   22 STREET ADDRESS   2201 S. 10TH STREET   23 STREET ADDRESS   2201 S. 10TH STREET   23 STREET ADDRESS   2201 S. 10TH STREET   24 STREET ADDRESS   2201 S. 10TH STREET   24 STREET ADDRESS   2201 S. 10TH ST. STE. A   33 STREET ADDRESS   2201 S. 10TH ST. STE. A   2201 S. 10TH ST. STE	12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12	
STREET ADDRESS   CITY-ST-ZIP	TITLE	P	DELETE ,	1.1 TITLE		Change Addition	
Title	NAME			1.2 NAME			
DELETE	STREET ADDRESS			1.3 STREET ADDRESS			
DELETE	CITY - ST - ZIP	FORT PIERCE FL		1.4 CITY-ST-ZIP			
STREET ADDRESS   2201 S. 10TH STREET   2.3 STREET ADDRESS   2.4 CITY-ST-ZIP	TITLE	VP	DELETE			Change Addition	
Title	NAME	CHANNON, CHRISTOPHER		2.2 NAME		ĺ	
DELETE   DELETE   DELETE   Addition	STREET ADDRESS	2201 S. 10TH STREET		2.3 STREET ADDRESS		~	
DELETE	CITY - ST - ZIP	FT. PIERCE FL		2.4 CITY - ST - ZIP			
STREET ADDRESS   2201 S. 10TH ST. STE. A		S	DELETE	· · · · · · · · · · · · · · · · · · ·		Change Addition	
CITY-ST-ZIP   FORT PIERCE FL   3.4. CITY-ST-ZIP	NAME	LANGLEY, KENNETH		3.2 NAME		·	
STREET ADDRESS   SA CITY-ST-ZIP   SA C	STREET ADDRESS	2201 S. 10TH ST. STE. A		3.3 STREET ADDRESS			
TITLE         DELETE         4.1 TITLE         Change         Addition           NAME         4.2 NAME	CITY-ST-ZIP	FORT PIERCE FL		3.4 CITY+ST-7IP			
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STREET ADDRESS							
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CITY-ST-ZIP 6.4 CITY-ST-ZIP			İ				
14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the information		irtify that the information supplied wit	h this filing does not qualify for t		Section 119.07(3)(i). Florida Statutes, Lfu	other certify that the information	

granual report is true and accurate and that my signature shall have the same legal effect as it made under oaut, mat i arn a ever or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

561-461-5660