

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735630

FILED  
Apr 20, 2007  
Secretary of State

Entity Name: LASER OPTICAL CORPORATION, INC.

## Current Principal Place of Business:

C/O 4855 BIG OAKS LANE  
ORLANDO, FL 32806

## New Principal Place of Business:

C/O 5509A COMMERCE DRIVE  
ORLANDO, FL 32839

## Current Mailing Address:

C/O 4855 BIG OAKS LANE  
ORLANDO, FL 32806

## New Mailing Address:

FEI Number: 59-2993261

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FLINCHBAUGH, HEIDI M.  
4855 BIG OAKS LANE  
ORLANDO, FL 32806 US

## Name and Address of New Registered Agent:

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

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FLINCHBAUGH, DR. DAV, ID E.  
Address: 4855 BIG OAK LANE  
City-St-Zip: ORLANDO, FL

Title: VSTD ( ) Delete  
Name: FLINCHBAUGH, HEIDI,  
Address: 4855 BIG OAKS LANE  
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete  
Name: STOCKING, KAREN  
Address: 8215 W. AVENUE D  
City-St-Zip: LANCASTER, CA 93536

Title: D ( ) Delete  
Name: FLINCHBAUGH, KARL L  
Address: 8215 W. AVENUE D  
City-St-Zip: LANCASTER, CA 93536

Title: D ( ) Delete  
Name: OLSON, JOEL  
Address: 4425 BOULDER TERRACE  
City-St-Zip: MADISON, WI 53711

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: /DAVID E. FLINCHBAUGH/

P

04/20/2007

Electronic Signature of Signing Officer or Director

Date