

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 735630

**FILED**  
**Apr 22, 2012**  
**Secretary of State**

**Entity Name:** LASER OPTICAL CORPORATION, INC.

**Current Principal Place of Business:**

C/O 5635 COMMERCE DRIVE  
ORLANDO, FL 32839

**New Principal Place of Business:**

C/O 5635 COMMERCE DRIVE  
ORLANDO, FL 32839 US

**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  
Name: FLINCHBAUGH, DR. DAVID E.  
Address: 4855 BIG OAK LANE  
City-St-Zip: ORLANDO, FL 32806 US

Title: VSTD  
Name: FLINCHBAUGH, HEIDI  
Address: 4855 BIG OAKS LANE  
City-St-Zip: ORLANDO, FL 32806 US

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: /HEIDI M. FLINCHBAUGH/

RA

04/22/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date