

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 758323

1 Corporation Name

National Examining Board of Ocularists, Inc.

Principal Place of Business

Mailing Address

3725 National Drive Suite 211
Raleigh, NC 27612

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 5/13/81	3a. Date of Last Report 3/3/94
4. FEI Number 59-2125778	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Country
24. Zip	25. Country
29. Zip	30. Country

9. Name and Address of Current Registered Agent

David Wyatt c/o L & B Laboratories, Inc.
Oakland Commerce Center
3403 Powerline Center
Ft. Lauderdale, FL 33309

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code

I, Pursuant to the provisions of Sections 617.0502 and 617.1408, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered 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 David R. Wyatt DATE 6-29-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Chairman	11 TITLE	☐ Change ☐ Addition
NAME	Phillip Danz	12 NAME	
STREET ADDRESS	1726 Professional Drive	13 STREET ADDRESS	
CITY-ST-ZIP	Sacramento, CA 95825	14 CITY-ST-ZIP	
TITLE	Vice-Chairman	21 TITLE	☐ Change ☐ Addition
NAME	David Bulgarelli	22 NAME	
STREET ADDRESS	625 First Avenue	23 STREET ADDRESS	
CITY-ST-ZIP	Goraville, IA 52241	24 CITY-ST-ZIP	
TITLE	Treasurer	31 TITLE	☐ Change ☐ Addition
NAME	John J. Kelley, Jr.	32 NAME	
STREET ADDRESS	101 W. Read St. Ste 817	33 STREET ADDRESS	
CITY-ST-ZIP	Baltimore, Maryland 21201	34 CITY-ST-ZIP	
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

I, I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] DATE 7/12/95 410-722-0790