## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

(7)

AMERICAN OPTICAL CORPORATION

incipal Place of Business	Mailing Address
14 MECHANIC STREET-TAX DEPT	14 MECHANIC STREET-TAX DEPT
SOUTHBRIDGE MA 01550	SOUTHBRIDGE MA 01550

						3. Date Incorporated or Qualified 04/11/1967	3a. Date	of Last F 0/12/1		
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	<del></del>		Applied For	
21		26				04-0400000			Not Applica	ble
[22]	pt #, etc.	Suite, Apt. #, etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & St	City & State City & State			6. Election Campaign Financing  Trust Fund Contribution			\$5.00 May Be Added to Fees			
Z <sub>(2)</sub>	Country Zip 25 29 30			ntry		8. This corporation has liability for in Florida Statutes Yes				
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered A				gent		
CTC	CORPORATION SYSTEM			B1	Name			<u> </u>		
1200	S. PINE ISLAND ROAD			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)			
PLAN	NTATION FL 33324		i	83						
:				84	City		FL	1 - 1	ip Code	
	nt to the provisions of Sections 607.050 stered agent, or both, in the State of Flor with, and accept the obligations of, Section 1, these or provided consecting seems agents.	ction 607.0505, Florida Statute	98.	orpo	amed corpora oration's board	d of directors. I hereby accept the appo	pose of char pose of char poste	ging its egistered	registered of d agent. I am	
12,		ND DIRECTORS	13.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFI		NBECT	OBS IN 12	— ફ
FILLE	CD	DELETE	1. 1 TI	TLE	T			Change		S S S S S S S S S S S S S S S S S S S
NAMI	CUNNIFFE, MAURICE J.		1.2 NA	ME			_			
STREET ADDRES					ADDRESS .					18
City S1-ZiP	SOUTHBRIDGE MA									[
LI, FE	TV	DELETE		1.4 City-ST-ZiP 2 1 Title				Change	☐ Addition	<u>.</u> ⊢8
NAME	BECKETT, STEVEN J	-	2 2 NA				L	ununge		"
STREET ADDRESS			1		ADDRESS					i
CITY - ST- 20F	SOUTHBRIDGE MA		24 CHY			•				i
TITLE	V	DELETE	3 1 Ti		·			Change	Addition	
NAME	SKOTT, ALLEN I		3 2 NA	ME				evening.		"
STREET ADDRESS	44.5150(45400.00				ADDRESS					
CHY-S1-ZIP	SOUTHBRIDGE MA		3.4 CIT							
TULF	VS	DELETE	4.1 10					Change	☐ Addition	
NAMI	COTTER, WILLIAM D		4.2 NA		-		LJ	3gv	- 1.00000	
STREET ADDRESS	14 MECHANIC STREET				ADORESS					
011Y - \$1 - ZIP	SOUTHBRIDGE MA		4.4 CIT							
1016	VD	DELETE	5 1 Til	-				Change	☐ Addition	$\dashv$
NAMt	VAN DYKE, JOHN W.		5 2 NA							
STELLET ADDRESS	44.4450144440.00				ADDRESS					[
CHY-SI-ZIP	SOUTHBRIDGE MA		5 4 CiT							•
1000	AT	DELETE	6 1 Til		- 1 (1)		۲٦	Change	Addition	
NAME	BRIDGMAN, GARY L.		6.2 NA				Li	nuarige	Audition	'
STREET ADDRESS					unness :					
C-TY ST-Z-P	SOUTHBRIDGE MA				ADDRES3					
U 11 Ul-Z-F	OCCUPATION NAME OF THE PARTY OF		6 4 CIT	12 - Y	- ZIP					- 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 outh; that I am an officer or directly of the corporation on the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if changed, or on an abaliment with an address.

SIG	NA	TU	IRE	
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RINTED NAME OF SIGNING OFFICER OR DIRECTOR

GARY L. BRIDGMAN 2/13/96

(508) 765-2021