

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F00000002147

FILED
Feb 18, 2003
Secretary of State

Entity Name: DISPENSERS OPTICAL SERVICE CORPORATION

Current Principal Place of Business:

1815 PLANTSIDE DRIVE
LOUISVILLE, KY 40299

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 35000
LOUISVILLE, KY 40232

New Mailing Address:

FEI Number: 61-1078280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ARENSBERG, CHARLES S
Address: 1815 PLANTSIDE DRIVE
City-St-Zip: LOUISVILLE, KY 40299

Title: ST () Delete
Name: STITES, JOHN H III
Address: 1815 PLANTSIDE DRIVE
City-St-Zip: LOUISVILLE, KY 40299

Title: VPC () Delete
Name: SCOTT, PERI BOROWICK
Address: 1815 PLANTSIDE DRIVE
City-St-Zip: LOUISVILLE, KY 40299

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PERI BOROWICK SCOTT

VPC

02/18/2003

Electronic Signature of Signing Officer or Director

_____ Date