

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00120

Entity Name: DUNDEE OPTICALS, INC.

FILED  
Apr 03, 2009  
Secretary of State

## Current Principal Place of Business:

100 N. INDIAN ROCKS ROAD  
BELLEAIR BLUFFS, FL 33770

## New Principal Place of Business:

## Current Mailing Address:

100 N. INDIAN ROCKS ROAD  
BELLEAIR BLUFFS, FL 33770

## New Mailing Address:

FEI Number: 59-2028405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RAYMOND, J. PAUL  
400 CLEVELAND ST.  
CLEARWATER, FL 34615 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: PD ( ) Delete  
Name: DUNDEE, JIMMY S.,  
Address: 2510 ROLLING VIEW DRIVE  
City-St-Zip: DUNEDIN, FL 34698

Title: VSD ( ) Delete  
Name: DUNDEE, CATHERINE V.,  
Address: 2510 ROLLING VIEW DRIVE  
City-St-Zip: DUNEDIN, FL 34698

Title: AS ( ) Delete  
Name: RAYMOND, J. PAUL,  
Address: 400 CLEVELAND ST.  
City-St-Zip: CLEARWATER, FL

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

SIGNATURE: JIMMY S. DUNDEE

PD

04/03/2009

Electronic Signature of Signing Officer or Director

Date