

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 29 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F92000000511 (7)
 1. Corporation Name
BAUSCH & LOMB SERVICES CORP.



Principal Place of Business C/O TAX DEPT. ONE LINCOLN FIRST SQUARE ROCHESTER NY 14604-701 US--	Mailing Address C/O BAUSCH & LOMB, INC. TAX DEPT. ONE LINCOLN FIRST SQUARE ROCHESTER NY 14601 US--
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 12/04/1992	3a. Date of Last Report 03/13/1996
21 One Bausch & Lomb Place	26 Same as #2	4. FEI Number 16-1426825	Applied For Not Applicable		
22 c/o Tax Dept.	27	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required		
23 Rochester, NY	28	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees		
24 14604-2701	25 USA	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				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 FL	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 _____ DATE _____
Signatures typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CP	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	CP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SASSANO, CARL E		1.2 NAME	(Sbaldeston, Stephen J.	
STREET ADDRESS	ONE BAUSCH & LOMB PLACE		1.3 STREET ADDRESS	60 McCoord Woods Drive	
CITY - ST - ZIP	ROCHESTER NY 01		1.4 CITY - ST - ZIP	Fairport, NY 14450	
TITLE	VD	<input type="checkbox"/> DELETE	2.1 TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CONNORS, GARY		2.2 NAME	Castor, Richard G.	
STREET ADDRESS	ONE LINCOLN PLACE		2.3 STREET ADDRESS	RPD #2	
CITY - ST - ZIP	ROCHESTER NY 14601		2.4 CITY - ST - ZIP	Bedford, NY 10506	
TITLE	S	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GEISEL, JEAN F		3.2 NAME		
STREET ADDRESS	ONE LINCOLN PLACE		3.3 STREET ADDRESS		
CITY - ST - ZIP	ROCHESTER NY 14601		3.4 CITY - ST - ZIP		
TITLE	TD	<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RESNICK, ALAN H		4.2 NAME		
STREET ADDRESS	ONE LINCOLN PLACE		4.3 STREET ADDRESS		
CITY - ST - ZIP	ROCHESTER NY 14601		4.4 CITY - ST - ZIP		
TITLE	ASD	<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SHAW, ROBERT H III		5.2 NAME		
STREET ADDRESS	ONE LINCOLN PLACE		5.3 STREET ADDRESS		
CITY - ST - ZIP	ROCHESTER NY 14601		5.4 CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	See Attached	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Alan H. Resnick* **ALAN H. RESNICK** 4-14-97 716-338-6000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)

BAUSCH & LOMB SERVICES CORP.
ROCHESTER, NEW YORK
NAMES & ADDRESSES OF OFFICERS

<i>Name and Title</i>	<i>Business Address</i>
Stephen J. Osbaldeston Chairman of the Board & President	1400 N. Goodman Street Rochester, NY 14609
Gary S. Connors Vice President	One Bausch & Lomb Place Rochester, NY 14604-2701
Richard G. Castor Vice President	Rfd #2 Bedford, NY 10506
Jean F. Geisel Secretary	One Bausch & Lomb Place Rochester, NY 14604-2701
Robert H. Shaw, III Assistant Secretary	One Bausch & Lomb Place Rochester, NY 14604-2701
Alan H. Resnick Treasurer	One Bausch & Lomb Place Rochester, NY 14604-2701

BAUSCH & LOMB SERVICES CORP.
ROCHESTER, NEW YORK
NAMES & ADDRESSES OF DIRECTORS

<u>Name</u>	<u>Business Address</u>
Gary Connors	One Bausch & Lomb Place Rochester, NY 14604-2701
Robert H. Shaw, III	One Bausch & Lomb Place Rochester, NY 14604-2701
Alan H. Resnick	One Bausch & Lomb Place Rochester, NY 14604-2701