2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000003578

Entity Name: COLE VISION SERVICES, INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
4000 LUXOTTICA PLACE MASON, OH 450408114					
Current Mailing Address:			New Mailing Address:		
P O BOX 8509 MASON, OH 450407114 US			ATTN: TAX DEPT, P O BOX 8509 MASON, OH 450407114 US		
FEI Number:	34-1733137	FEI Number Applied For () FEI Num	nber Not Appli	licable () Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address of New Registered Agent:	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US					
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:					
		ic Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D (X) GIACOBBI, VAL P O BOX 8509 MASON, OH 45		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BOXER, MICHA 44 HARBOR PA		Title: Name: Address: City-St-Zip:	DVPS (X) Change () Addition BOXER, MICHAEL 44 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050	
Title: Name: Address: City-St-Zip:	CFO () DENNIS, JACK PO BOX 8509 MASON, OH 45	Delete 040	Title: Name: Address: City-St-Zip:	CFO (X) Change () Addition DENNIS, JACK PO BOX 8509 MASON, OH 450407114	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	COO () Change (X) Addition BRADLEY, KERRY PO BOX 8509 MASON, OH 450407114	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	PRES () Change (X) Addition DIGIANDOMENICO, ELIIZABETH PO BOX 8509 MASON, OH 450407114	
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	TREA () Change (X) Addition GIANNOLA, VITO 44 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050	

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: JACK DENNIS CFO 04/25/2008