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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

F95000002951 DOCUMENT #

COLE MANAGED VISION, INC.

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Principal Place of Business Mailing Address C/O COLE VISION CORPORATION 18903-800TH MILES ROAD C/O COLE VISION CORPORATION 18903 SOUTH MILES ROAD 110 5915 LANDERBROOK DR., SUITE -CLEVELAND OH 44128 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>GLEVELAND. OH 44124</u> 06/19/1995 2. Principal Place of Business 4 FELNumber Applied For 34-1795292 26 Not Applicable Suite, Apt #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing  $\Box$ 23 28 Trust Fund Contribution Added to Fees Žip Country Ζıρ Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 ☐ Yes 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent C T CORPORATION SYSTEM 81 Name 1200 SOUTH PINE ISLAND ROAD 82 Street Address (P.O. Box Number is Not Acceptable) PLANTATION FL 33324 **B3** 64 City 85 Zip Code 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, it am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, 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 CORD DELETE Change Addition 1 1 TITLE Tille COLE, JEFFREY A 700002902827--4 NAME 1.2 NAME **CR2E034** 5915 LANDERBROOK DRIVE -06/11/99--01105--020 STREET ADDRESS 1.3 STREET ADDRESS **MAYFIELD HEIGHTS OH 44124** \*\*\*\*150,0<u>0</u> \*\*\*\*150.00 CITY-ST-ZIP 1.4 CITY - S1 - ZIP VD DELETE 21 TITLE Crange Addition TITLE SMITH, BRIAN B 2.2 NAME NAME 18903 SOUTH MILES ROAD STREET ADDRESS 2.3 STREET ADORESS WARRENSVILLE HEIGHTS OH 2 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 31 TITLE ☐ Crange OSGOOD, DENNIS C NAME 32 NAME 18903 SOUTH MILES ROAD STREET ADDRESS 3.3 STREET ADDRESS WARRENSVILLE HEIGHTS OH 34 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 41 TITLE Change Addition GAGLIOTI, JOSEPH NAME 4.2 NAME 5915 LANDERBROOK DRIVE STREET ADORESS 4.3 STREET ADORESS **MAYFIELD HEIGHTS OH 44124** CITY-ST-ZIP 4.4 CITY+ST-ZIP DELETE 5 1 TITLE Change Addition TITLE MOSLEY, WAYNE NAME 5.2 NAME 5915 LANDERBROOK DRIVE STREET ADDRESS **5 3 STREET ADDRESS** MAYFIELD HEIGHTS OH 44124 CITY - ST-ZIP 5 4 CITY - S1 - ZIP DELETE TITLE 6 1 TITLE Change Addution SHERRIFF, DAVID T NAME 6.2 NAME 5915 LANDERBROOK IN, 300 STREET ADDRESS **6 3 STREET ADDRESS** CLEVELAND OH CITY-ST-ZIP 6 4 CITY - ST - 21P 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). 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

WAYNE L. MOSLEY ilsalaa Vila IIVa w

## COLE MANAGED VISION, INC. (Delaware)

**DIRECTORS:** 

Jeffrey A. Cole Brian B. Smith Dennis C. Osgood Joseph Gaglioti

Wayne L. Mosley David J. Sherriff

Chairman of the Board Vice Chairman

President

Treasurer & Assistant Secretary

Assistant Treasurer

Secretary and General Counsel

Jeffrey A. Cole Joseph Gaglioti Brian B. Smith