FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J15794 (7)DAVID J. STRUNK, O.D., P.A. Principal Place of Business Mailing Address 101 S. COURTENAY PARKWAY 101 S. COURTENAY PARKWAY MERRITT ISLAND FL 32952 MERRITT ISLAND FL 32952 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/22/1986 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 250 N. COURTENAY PKY. 26 250 N. CONRTENAY PKY 59-2689297 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc.

BREVARD EYE CENTER \$8.75 Additional 5. Certificate of Status Desired BREVARD EYE CENTER Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 28 MERRITY MERRITT ISLAND 54AND Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible BREVARD 32953 BREVARO X Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent STRUNK, DAVID J.

FILED Mar 25 1998 8:00am Secretary of State



-101-S. OOURTENAY PARKWAY MERRITT ISLAND FL 32952			82	Street Address (P.O. Box Number is Not Acceptable)			
			83				
			84	City			Code
office or r	to the provisions of Sections 607.0502 and egistered agent, or both, in the State of Flor m familiar with, and accept the oblightions	ida. Such change was au	thorized by	the corp	corporation submits this statement for the purporation's board of directors. I hereby accept the	oose of changing	its registered
SIGNATURE	Signature, typod or profed name of registered agent and to	to it woods able (NOTE	Renislered Ane	nt eigneture	required when reinstating)	DATE	
			T 13.	in digitation	ADDITIONS/CHANGES TO OFFICER		RS IN 12
TITLE	PD	DELETE	1.1 TOTLE			Change	Addition
NAME	STRUNK, DAVID J.		1.2 NAME			_	ļ
STREET ADDRESS	101 C. COURTENAY PKWY		1.3 STREET	ADDRESS	2180 MANGO LANE		
CITY-ST-ZIP	MERRITT ISLAND FL		1.4 CITY-S				ļ
TITLE	ST	DELETE	2.1 TITLE			☐ Change	Addition
NAME	STRUNK, DAVID J.		2.2 NAME				
STREET ADDRESS	-101-S. COURTENAY PKWY-		2.3 STREET	address	2180 MANGO LANE	4.	
CITY-ST-ZIP	MERRITT ISLAND FL		2. 4 CITY - S				
TITLE		DELETE	3.1 TITLE			☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CITY - S	T-ZIP			
TITLE		DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP			4.4 CITY-S	r- ZIP			
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADORESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY-S	- Z IP			
TITLE		DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				,
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY-S				
14. Thereby 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 eath; 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							