2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2009
Secretary of State

DOCUMENT# N98000005057

Entity Name: LAKELAND VISION, INC.

Current Principal Place of Business:

228 S MASSACHUSETTS AVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

PO BOX 1076
LAKELAND, FL 33802

New Mailing Address:

FEI Number: 59-3531304 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

TOUCHTON, DAVID M
811 E MAIN ST
LAKELAND, FL 33801 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

OFFICERS AND DIRECTORS:

Title: VCD ( ) Delete
Name: WIGGS, R H
Address: 4406 SOUTH FLORIDA AVENUE #17
City-St-Zip: LAKELAND, FL 33813

Title: SD ( ) Delete
Name: FIELDS, GOW B
Address: 229 NORTH FLORIDA AVENUE
City-St-Zip: LAKELAND, FL 33801

Title: CD ( ) Delete
Name: TOUCHTON, DAVID M
Address: 811 EAST MAIN STREET
City-St-Zip: LAKELAND, FL 33801

Title: VCD ( ) Delete
Name: STEED, PAT
Address: PO BOX 2089
City-St-Zip: BARTOW, FL 33830

Title: TD ( ) Delete
Name: HOLLEN, RANDY
Address: 101 S FLORIDA AVE
City-St-Zip: LAKELAND, FL 33801

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:

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

SIGNATURE: DAVID M TOUCHTON CD 04/28/2009

Electronic Signature of Signing Officer or Director — Date