2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State
05-27-2008 90043 031 ****61.25

DOCUMENT # N99000003454

1. Entity Name
MANASOTA OPTOMETRIC SOCIETY, INC.

Principal Place of Business	Mailing Address
7313 SAND PL E BRADENTON, FL 34203	7313 SAND PL E BRADENTON, FL 34203

03272008 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
7313 52nd Place East	7313 52 nd Place East
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Bradenton, FL	City & State: Bradenton, FL
Zip: 34203 Country: USA	Zip: 34203 Country: USA

4. FEI Number: 52-2196027 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CARR, WILLIAM OD
7313 52ND PL E
C/O MANASOTA OPTOMETRIC SOCIETY
BRADENTON, FL 34203

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] Secretary/Treasurer 5/19/08
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BEDINGHAUS, TROY 5129 40TH ST W BRADENTON, FL 34210	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD WALKER, SCOTT 7313 52ND PL E BRADENTON, FL 34203	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD Carr, William 7313 52nd Place East Bradenton, FL 34203 ☒ Change ~~☐ Addition~~
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOVIO, STEVE 3691 WEBBER ST. SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MURPHY, BRIAN 2003 CORTEZ RD. WEST BRADENTON, FL 34207	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MALONEY, MICHAEL 8433 TUTTLE RD SARASOTA, FL 34243	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAMMOND, MELISSA 8433 TUTTLE RD SARASOTA, FL 34243	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] / William R. Carr, O.D. 5/19/08 (941) 713-4250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #